



**SUNRISE
REGIONAL HEALTH AUTHORITY**

2004-2005

ANNUAL REPORT



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To view a copy of this report on-line, visit the Sunrise Health Region website at www.sunrisehealthregion.sk.ca. Simply click on 'Documents' at the top of our home page.

Hard copies of the Annual Report, or copies of the addendum Payee Disclosure List, are available at Sunrise Health Region's Executive Office:

Park Unit (Yorkton Regional Health Centre campus)
270 Bradbrooke Drive
Yorkton, Saskatchewan

or by calling (306) 786-0100.

Letter of Transmittal

June 30, 2005

The Honourable John T. Nilson
Minister of Health
Province of Saskatchewan

Dear Mr. Nilson:

The Sunrise Regional Health Authority is pleased to provide you and the residents of the health region with its 2004-2005 Annual Report.

The report provides the audited financial statements of the region for the year ended March 31, 2005. The report also outlines the region's activities and accomplishments for the period.

Respectfully submitted,



Ben Weber
Chairperson
Sunrise Regional Health Authority

Management Discussion and Analysis

Who We Are

The mission of the Sunrise Health Region is *to improve the health and well-being of individuals and communities through leadership, collaboration and the provision of high quality health services.*

In support of this mission, our board, management, staff, volunteers and physicians will strive to abide by the following values:

We will promote a positive work environment that is safe and secure, stimulating, challenging and enjoyable.

We will serve in a caring, concerned and compassionate manner.

We will provide the highest possible quality in all aspects of care and service delivery.

We will base our decisions on the best available evidence.

We will treat people with dignity, respect and trust.

We will communicate openly and honestly.

We will acknowledge the rights and responsibilities of individuals, both in receiving and delivery of care or service.

We will fulfill our mission by pursuing teamwork, partnership and collaboration.

We will be accountable for our actions to the people we serve and to each other.

We will be responsive to the culturally-diverse needs of the people we serve.

The mission and values of the health region are devoted to achieving our long-term vision: *Working together ... for healthy people in healthy communities.*

All of the above are intended to support the Performance Plan produced by Saskatchewan Health, which contains a common vision – *Building a province of healthy people and healthy communities* – and a common set of four goals and objectives for the health system:

- *Improved access to quality health services*
- *Effective health promotion and disease prevention*
- *Retain, recruit and train health providers*
- *A sustainable, efficient, accountable, quality health system*

The Sunrise Regional Health Authority (RHA) provides health services to the residents of 51 cities, towns and villages, 28 rural municipalities, and three First Nations in east central Saskatchewan – approximately 58,000 Saskatchewan residents in total.

Roughly 2,700 staff members in the region provide and support health care through community-based services and within our 24 facilities. The region's head offices are located in Yorkton, a city of 17,000 residents, which is both the largest and the most central community in the region.

The affairs of the region are guided by a 12-person Regional Health Authority, the members of which are appointed by the Government of Saskatchewan. The Regional Health Authority appoints a Chief Executive Officer who is responsible for the general administration and organization of the region.

Members of the Sunrise Regional Health Authority Board:

Ben Weber, Chairperson, of Yorkton; retired psychiatric nurse

Ivan Peterson, Vice Chairperson, of Hazel Dell; retired teacher and farmer

Irene Adams of Langenburg; retired teacher

Janet Hill of Yorkton; businessperson

Audrey Horkoff of Kamsack; farmer/rancher

Karen Keshane of Key First Nation; community health representative

Raymond King of Foam Lake; retired hospital administrator

Greg Kobylka of Yorkton; Saskatchewan Lotteries manager

Beverly Kostichuk of Insinger; farmer/social worker

John Nightingale of Esterhazy; retired mining executive

Jennie Ortynsky of Canora; retired nurse

Albert Seib of Melville; farmer

Public Transparency

The dates, times and locations of all public RHA meetings are listed on the health region's web site and also distributed to local media outlets. Members of the public and area journalists are welcome to attend and observe the meetings, and can also contact the region in order to be included on the meeting agenda and make presentations to the RHA.

RHA meeting minutes, once approved, are posted on the web site and are public documents, as are the Strategic Plan and this Annual Report. Hard copies of the above can be obtained at the region's administrative office in Yorkton. Subsequent to all RHA meetings, a newsletter summarizing the meeting's highlights is distributed to all local media outlets. The targeted time frame for distribution of the *BoardBrief* is 48 hours after the meeting's completion.

Community Health Advisory Committees

Six geographically-based Community Health Advisory Committees (CHACs) have been established for the purpose of providing the Sunrise Regional Health Authority with advice respecting the provision of health services. CHACs provide advice to the RHA in

the areas of program and service development and delivery, health issues, needs and priorities, access to health services, and promotion of health. A total of 20 CHAC meetings were held in 2004-2005, addressing topics including the health status of the population, strategic plans for the health region, recruitment and retention of staff and physicians, quality improvement processes, and finances.

CHAC members are appointed by the Regional Health Authority. Prospective members may be recommended by the CHAC or other community groups or individuals, and are expected to complete a declaration of interest.

In addition to the Community Health Advisory Committees, the health region also has public/external participation on the Primary Health Care Regional Planning Team, the Mental Health Program Review Steering Committee, the Population Health Promotion Strategy steering committee and the Diabetes Strategy steering committee.

Health Care Organizations and Third Party Relationships

Saul Cohen Centre, Melville

Located in Melville, the Saul Cohen Centre is a non-profit organization offering counselling regarding the use or misuse of drugs or alcohol. Centre staff provide services in Esterhazy twice a week, and in Ituna bi-weekly. Sunrise Health Region provides financial and payroll services to the centre, as indicated in the region's audited financial statements.

Parkland Alcohol and Drug Abuse Society (PADAS)

PADAS, located in Yorkton, is a non-profit organization that offers services to anyone troubled by their own or someone else's use of alcohol or drugs. Sunrise Health Region contracts with PADAS for services, with an annual service agreement that sets out the budget and terms and conditions of the service provided.

KidsFirst

KidsFirst is an early childhood development program, intended to provide vulnerable children with the best possible start in life, and to ensure they will be nurtured and supported by well-functioning families and communities. Sunrise Health Region is the accountable partner and provides KidsFirst with financial, payroll and information technology services for a fee.

Society for the Involvement of Good Neighbours (SIGN)

SIGN is a private non-profit corporation located in Yorkton that partners with local agencies and organizations to develop and deliver needed social services to area residents. Sunrise Health Region contracts with SIGN for services, with an annual service agreement that sets out the budget and terms and conditions of the services provided.

Emergency Medical Services

Emergency medical services, ambulance services, and First Responder services are provided to communities in the health region by a combination of contract ambulance services and district-owned services. The ambulance services in the region are:

Privately contracted:

Canora Ambulance Care
Kilbach's Ambulance Service (Esterhazy and area)
Shamrock Ambulance Service (Foam Lake and area)
Duck Mountain Ambulance Care (Kamsack, Norquay and area)
Preeceville Ambulance Service
Crestvue Ambulance Services (Yorkton and area)

RHA Owned and Operated:

Langenburg Emergency Medical Service
Melville Emergency Medical Service
Ituna Emergency Medical Service

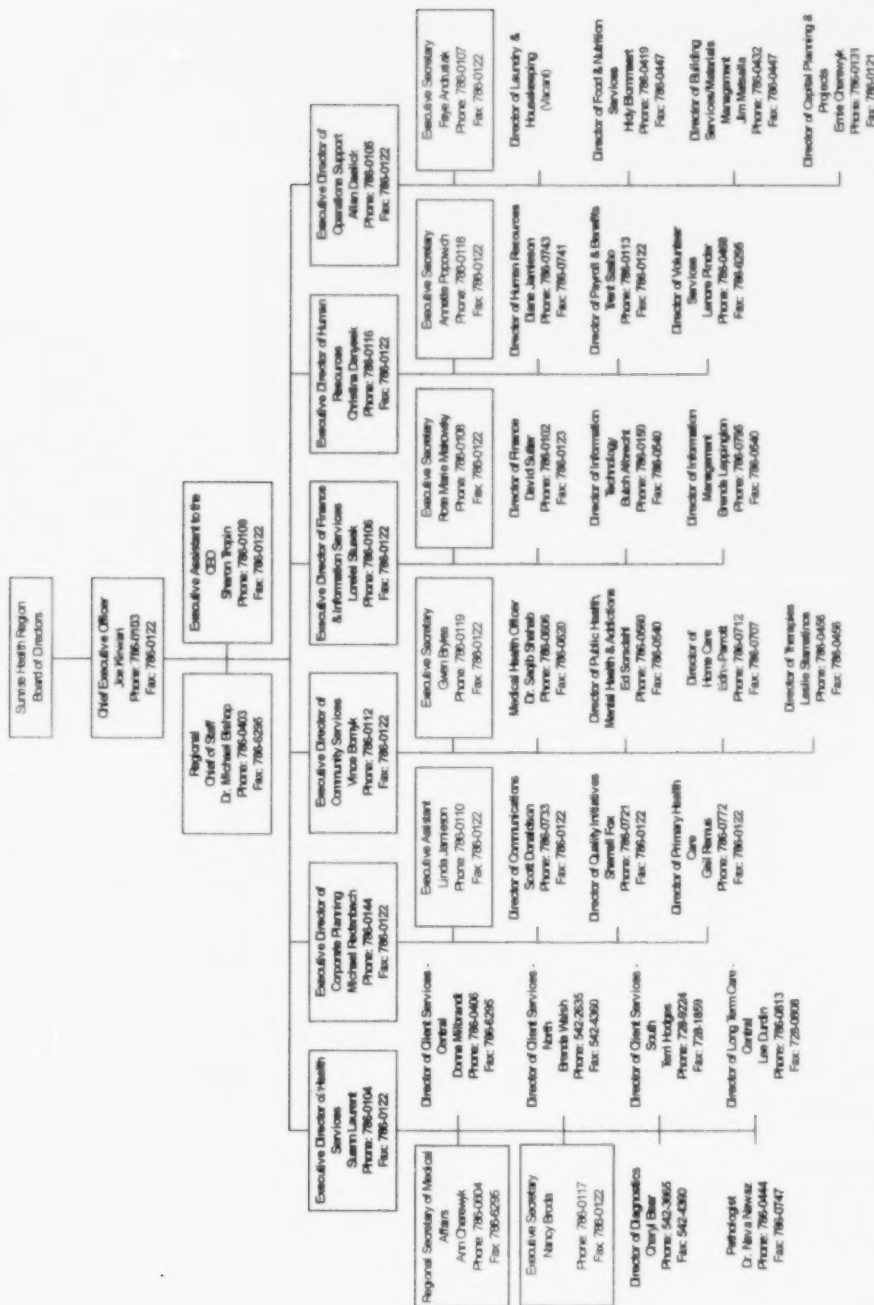
St. Paul Lutheran Home, Melville

St. Peter's Hospital, Melville

St. Anthony's Hospital, Esterhazy

These faith-based facilities are affiliates of Sunrise Regional Health Authority. Their financial and operational relationship with the health region is defined by *The Regional Health Services Act*. Each is governed by its own Board of Directors, which appoints a facility administrator to oversee the facility's staff and management team.

**SUNRISE HEALTH REGION
EXECUTIVE LEVEL ORGANIZATIONAL CHART May 2005**



Regional Environmental Scan

Demographics

Sunrise Health Region has a total covered population of 58,033 (2004 Covered Population). As with all rural health regions in Saskatchewan, Sunrise has experienced a trend of slowly decreasing population over many years. Within the region, the population is migrating toward larger communities, and in particular, to the City of Yorkton which has a population of 17,186 – 30% of the region's total population.

Other larger communities in the region, and their respective populations, are Melville (4,595); Esterhazy (2,657); Canora (2,441); Kamsack (1,966); Foam Lake (1,254); Preeceville (1,242); and Langenburg (1,133). These seven communities have a total population of 15,288 – representing 26% of the region's population.

The remaining 25,559 regional residents are dispersed throughout 82 rural municipalities, towns, villages and hamlets. Also included in that total are 1,612 residents of the Cote, Key, and Keeseekoose First Nations. Approximately 5.6% of the region's total population is of aboriginal descent, while less than 1% of the population consists of other visible minorities.

Perhaps the key characteristic of the health region's population is that it is significantly older than the provincial average; its population can appropriately be described as the *oldest* in the province. Approximately 22% of the health region's population are over age 65 (provincially, 14.5%), while 12% are over the age of 75 (provincially, 7.6%).

Health Status

Sunrise Regional Health Authority, under the leadership of Dr. Saqib Shahab, Medical Health Officer, completed and released a Health Status Report in 2002, and an update in 2003. This report has been used widely in the region to assist in strategic planning and the development of the population health promotion strategy, and primary health care and diabetes plans.

Income

Sunrise Health Region has an average income 16% lower than the provincial average (\$18,846 vs. \$22,541), and its percentage of low-income families is 19.5%, compared to 18.3% for the province.

Employment

In 2001, the unemployment rate for Sunrise Health Region was 6.5%, compared to 5.8% for Saskatchewan.

Education

Twenty-two per cent of the population in Sunrise Health Region has a less-than-grade-nine education; in comparison, the provincial rate is 13 per cent.

Housing

Approximately 15% of households in Sunrise Health Region spend more than 30% of their income on shelter expenses; this compares favourably with the provincial rate of 18.5% of households.

Morbidity and Mortality

Sunrise Health Region has a higher number of *potential years of life lost* than the Canadian average, and higher levels of stress, obesity, and smoking. Life expectancy and age-standardized mortality rates are comparable to Saskatchewan rates. Since 1997, the Sunrise Health Region has had a lower infant mortality rate than the province as a whole.

Chronic Disease

The prevalence of high blood pressure in Sunrise Health Region is higher than in Saskatchewan; incidence of cancer is generally lower; the number of people reporting pain or discomfort that limits activities is higher.

Relatively poorer health status as it relates to chronic diseases such as diabetes and heart disease can be partly explained by determinants of health (especially income, education, isolation, community capacity, and resources) and its association with a higher prevalence of risk factors such as smoking, obesity, and physical inactivity. It may also be partly explained by a relatively older population.

Higher incidence of chronic diseases increases pressures on the acute health care system. Sunrise Health Region is working towards primary prevention by enhancing health promotion and disease prevention through its *Population Health Promotion Strategy*. The region also plans to enhance secondary prevention through primary care.

Health Status summary: Sunrise Health Region does not compare favourably to the provincial average on many of the key determinants of health. For income, employment, education, and many lifestyle factors (obesity, physical inactivity), the residents of Sunrise Health Region are at a disadvantage. When coupled with a significantly older population, the demands placed on the health care system are large.

The complete Health Status Report is available at www.sunrisehealthregion.sk.ca.

Community/Client/Key Stakeholder Expectations

The most fundamental expectations expressed by most key stakeholders is timely and appropriate access to hospital services, physician services, and specialized and diagnostic services. Of these, the provision of family physician services has been most problematic in 2004-2005, with many communities experiencing turnover of physicians, and great difficulty in replacing them.

Stakeholders expressing this opinion include patients and their families, members of the public, municipal leaders, and health care employees, among many others. In addition, the public and municipal leaders continue to feel strongly about the provision of services "close to home".

Expectations have been raised in a few key areas, due to provincial and health region announcements:

- The delivery of CT scanning services at Yorkton Regional Health Centre was highly anticipated by the public, and was welcomed by residents from throughout the region when service began in January 2005.
- Construction of a new multi-purpose (long-term care replacement) facility, attached to Yorkton and District Nursing Home, has proceeded on schedule and on time, and is regarded as a highly-visible "good news" story for the region.
- Continuation of the planning for, and ultimate construction of, a new integrated facility in Preeceville.
- The delivery of primary health care services, and the extent to which this will assist in the retention of rural physicians, is viewed with some optimism by stakeholders. This optimism has been rewarded by the hiring of three Nurse Practitioners (Norquay, Langenburg, Foam Lake). However, lack of movement on the establishment of alternate payment contracts for physicians has had a dampening effect.

As part of an ongoing regional needs assessment process, Sunrise RHA will be entering into dialogue with communities to discuss current priorities for service delivery, expressed needs of the community, opportunities for new partnerships and program development, and implications on services resulting from a review of alternatives. This dialogue is being undertaken through a variety of means, most notably through Community Health Advisory Committees. Community development processes arising from the primary health care plan will also be important to the needs assessment process.

Regional Economic Trends

The economic trends of the region are dictated largely by the successes or failures of the agricultural economy, which in turn has a significant impact on demographic changes within the region. Sunrise Health Region is not unique in its economic experience relative to other rural health regions. There are fewer farms and fewer farmers; businesses that serve the agricultural industry are consolidating in larger communities.

The past year was an extremely poor year for the agricultural sector, which affected most businesses in the region.

There are no economic trends of significance that will have an effect on the 2004-2005 operational plan for the Sunrise Health Region. The economic trends that contribute to the continuing population shift in the province will need to be considered in the long term.

Health Status and Outcome Indicators

The statistics below are collected by Sunrise Health Region and Saskatchewan Health as part of the Accountability Agreement between the region and the province. *SHR* indicates the Sunrise Health Region rate; *Sask.* indicates the provincial average; and *SHR Rank* indicates Sunrise Health Region's ranking relative to other Saskatchewan health regions, with 1 representing the most positive ranking and 12 the least positive ranking.

	SHR	Sask.	SHR Rank	Prov. Range
Infant Mortality , per 1,000 live births (1998-2002)	2.3	6.2	2	1.70-15.66
Life Expectancy				
At-birth, Male	75.6	76.2	8t	72.1-78.2
At-birth, Female	82.2	81.8	4	76.1-82.8
At 65, Male	81.6	81.9	8	80.6-83.0
At 65, Female	85.8	85.9	6	82.2-86.8
Overweight (BMI 25.0-29.9)	38.3%	35.8%	8	31.7-41.8%
Obese (BMI>30.0)	25.3%	20.5%	9t	16.4-27.2%
Physical Activity (self-reported, age 12+)	44.7%	49.8%	9	41.7-56.1%
Smoking Rates				
Total Male	22.6%	24.6%	3	20.8-40.7%
Total Female	23.3%	23.1%	7	11.6-42.0%
Self-Reported Health Status				
Excllnt/Vry Gd Health	47.6%	59.5%	11	47.6-63.2%
Diabetes Rate , per 1,000 population (age adjusted)	39.9	40.0	8	29.5-72.5%
Child/Youth Injury Hospitalization Rates per 1,000 population				
Male	10.0	9.3	8	6.7-17.6
Female	7.2	6.5	6	4.6-12.0

** Please refer to source documents for details on the indicators, the sources for their calculations and methodology. The source document used by the Sunrise Health Region in preparing this report is "Performance Management Accountability Indicators 2004/2005", prepared by Saskatchewan Health. Within that document various indicators have different sources, and different years from which the information was taken.

** Rankings are based on all 13 health regions. Note that due to their small and unique populations, northern health regions may not always be appropriately comparable.

Narrative Discussion of Indicators

Infant Mortality

Sunrise has a low infant mortality rate relative to the provincial average. Factors that influence infant mortality rates include effectiveness of pre-natal care, maternal education, drug, alcohol and tobacco use of expectant mothers, and diet/nutritional awareness of expectant mothers. Low infant mortality is also closely related to low birth weight rates. Sunrise has the lowest rate of low birth weight babies in the province.

Life Expectancy

Residents of Sunrise Health Region have a life expectancy very close to the provincial average, slightly higher than the provincial average for women and slightly lower for men. Average life expectancy for a population is influenced by socio-economic factors such as education and income levels, for which the Sunrise Health Region compares poorly with the province as a whole. Other factors that influence life expectancy include obesity, being overweight, and level of physical activity. For all of these factors, the health region compares poorly with the province.

Overweight, Obesity and Physical Activity

Sunrise Health Region residents have higher rates of obesity and being overweight, and lower rates of physical activity than the provincial average. These factors interact, and are risk factors for many chronic illnesses such as diabetes and heart disease. Because overweight and obesity were measured in the population 20-64 years of age, and physical activity in population ages 12 and over, lower rates in Sunrise may be due to the fact that we have proportionately more people ages 45 and over, and especially ages 65 and over, compared to other parts of the province.

Smoking Rates

Rates of smoking in Sunrise Health Region are very close to the provincial average – slightly lower for men, slightly higher for women.

Self-reported Health Status

The percentage of people in Sunrise Health Region who report their health as either very good or excellent is significantly below the provincial average, and among the lowest of all health regions. Self-reported health status can be influenced by age (Sunrise Health Region has the highest percentage of people over the age of 65, and over the age of 75, in the province) and socio-economic status (Sunrise is below the provincial average for income level and educational attainment).

Diabetes Rate

Sunrise is mid-range of health regions for prevalence of diabetes. Diabetes can be influenced by factors for which the Sunrise Health Region compares poorly (physical inactivity, high rates of obesity/overweight, age of the population). Diabetes is also of greater prevalence in the First Nations population, which in Sunrise Health Region is about eight per cent of the total population, and growing.

Child/Youth Injury Hospitalization Rates

Injury is the leading cause of hospitalization and deaths in children in Canada. Sunrise Health Region is mid-range of health region hospitalization rates, only slightly above the provincial average for both males and females. Hospitalization rates can be affected both by the actual number of injuries, and by hospital admission practices and the availability of hospital beds.

Major Initiatives & Accomplishments

CT Scan

Renovations to accommodate the new CT Scan in the Diagnostic Imaging Department at the Regional Health Centre in Yorkton were completed in December 2004, and service began in January 2005. The health region is budgeted to provide 3,000 scans per year; and along with the recruitment of a second radiologist to support the service, the addition of CT services to the Regional Health Centre has greatly improved the region's ability to meet the strategic objectives of the province and the region.

Multi-purpose Facility

Throughout 2004-2005 construction of a 93-bed addition to the Yorkton and District Nursing Home proceeded apace. The project, originally approved in principle in 1997, is scheduled to open – on time and on budget – in June 2005. The much-anticipated facility will include long-term care, respite, rehabilitation and observation beds, physical and occupational therapy department, day wellness program, a chapel, and central kitchen services for Yorkton.

Capital Investments

In addition to the multi-purpose facility, the health region also made the following major capital investments:

- St. Anthony's Hospital (roof replacement)
- Preeceville Integrated Health Facility (needs assessment)
- Yorkton Regional Health Centre (roof replacement)

"Legacy Project" – Green Ribbon Award Winner

At the Saskatchewan Association of Healthcare Organizations (SAHO) annual Green Ribbon Awards, the Sunrise Health Region's Legacy Project, *Something to Remember Me By*, won honourable mention in the categories of community involvement and continuum of care. The project took place at Yorkton and District Nursing Home and involved a partnership with local schools. Seventy-three students met with 46 residents on nine occasions and created written legacies presented to each resident and their families.

Quality Improvement Initiatives – Innovation Fund

Sunrise Health Region received Innovation Fund grants from the Health Quality Council for projects "devoted to supporting innovative implementation of evidence-based quality

improvement strategies.” In 2004-2005 a *Dysphagia Management in Long-term Care* project was undertaken at St. Paul Lutheran Home in Melville. The project involved applying best practices to reduce the incidence of complications caused by dysphagia. Sixty care staff were provided with training. Initial results are positive and work is underway to expand the lessons learned across the region.

For 2005-2006 Sunrise was also fortunate to receive an Innovation Fund grant for a research project on *Optimizing Drug Management in Home Care Clients*. The aim is to optimize drug management, and thereby reduce the utilization of inappropriate and potentially high-risk medications in a sample of home care clients.

Each of the above two projects demonstrates the region’s ongoing commitment to quality improvement and desire to implement best practices wherever possible.

Population Health Promotion Strategy

The Sunrise Health Region has developed and widely communicated a population health promotion strategy that complements the provincial priority areas of positive mental well-being, decreased substance use and abuse, accessible nutritious foods, and the promotion of physical activity. Working groups have been established for each priority area, and a Strategy Steering Committee has been established – all of which have broad representation from many community groups. Please visit www.sunrisehealthregion.sk.ca for a copy of the region’s Population Health Promotion Strategy.

Quality Workplace Initiatives

Sunrise Health Region has begun the process of developing broad strategies that will invest in our staff, support their needs, and retain and recruit high quality employees. Of particular note, the Region has initiated and/or continued with the following projects:

- Recognized over 400 employees with long-service awards
- Participated in the SRNA Quality Workplace project at two sites
- Designated resources for the enhancement of occupational health and safety projects, return-to-work, and duty-to-accommodate programming
- Continued to support a regional Healthy Workplace Committee which initiated projects such as a fitness challenge, a curling bonspiel, summer staff barbecues, and workplace champions.

Representative Workforce Strategy

Sunrise Health Region is committed to achieving a representative workforce. In addition to hiring a Representative Workforce Coordinator, the Region has delivered aboriginal awareness training to over 330 employees (with plans for training a greater number in 2005/2006), and has scheduled the signing of an aboriginal employment partnership agreement for June 22, 2005.

Recruitment Successes

The Region has had good success in the past year, in attracting employees to hard-to-recruit positions. The following classifications have been recruited to in the past year --

Registered Nurse, Licensed Practical Nurse, Special Care Aide, Library Technician, Public Health Inspector, Speech Language Pathologist, Psychologist, Laboratory and Diagnostic Imaging Technologists, and Health Information Practitioner. Recruitment activities include lifestyle advertising, bursaries, guaranteed hours, clinical practicum placements for students, and participation at job and career fairs. In addition, the Region has worked closely with the Saskatchewan Immigrant Nominee program to recruit nurses from out-of-country.

Primary Health Care Teams Established

On November 1, 2004 Sunrise Health Region hired three Registered Nurses (Nurse Practitioners) for the communities of Norquay, Langenburg and Foam Lake. Since that time the RN(NP)s, along with the Director of Primary Health Care, have established well-functioning primary health care teams. Team members include the local physicians, pharmacists, home care, public health and mental health staff, among others. For each of these teams the health region is not yet receiving primary health care funding, because the local physicians remain on fee-for-service payment, rather than alternate payment. Despite this, the physicians have been active, and invaluable, participants on the teams.

Progress & Results

Organizational Effectiveness

	SHR Yes	Sask n/a	SHR Rank n/a	Prov. Range n/a
CCHSA Accreditation Status				
Regional Quality of Care Coordinator				
Number of client contacts	164	n/a	3	n/a
Percent of concerns, concluded within 30 days	84%	87%	7 th	25-90%
Number of sick leave hours, per full-time equivalent				
CUPE	99.27	94.84	9	74.09-107.86
HSAS	52.54	63.34	1	52.54-120.03
SUN	81.04	93.07	4	70.00-98.43
OOS	40.47	47.69	3	38.86-56.87

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Narrative Discussion of Indicators

Accreditation and Concern Handling

The health region has a well-established concern-handling process in place, supported by the Quality of Care Coordinator position. Concerns are responded to in a timely and effective manner. The health region has achieved a three-year accreditation (with report). For the six recommendations which required a written report, the health region submitted a report to the Canadian Council on Health Services Accreditation and received a response indicating that all corrective measures were satisfactory. As one part of an overall approach to quality monitoring and improvement, accreditation is next scheduled to occur in late fall 2006.

Sick Leave Statistics

Sick leave utilization continues to be an area of focus for the region, and some success has been achieved with regards to overall sick leave utilization. The focus for the region in the upcoming year will be on rates within the region, and variability between facilities and departments.

Program-specific Expectations

	SHR	Sask	SHR Rank	Prov. Range
Alcohol and drug inpatient treatment, completion rate per 100 admissions ¹				
Child/Youth	100.0	61.6	1	n/a
Adult	95.5	70.3	1	n/a
Alcohol and drug outpatient treatment, completion rate per 100 admissions.	57.5	58.4	6	43.7-72.6%
Genital Chlamydia rate per 100,000 population				
Males	66.1	268.1	3	27.4-3259.0
Females	169.1	473.4	4	53.8-5784.4
Influenza immunization rate per 100 population.	61.9	65.8	8t	56.8-72.8
Number of exams for specialized medical imaging services – MRI Scans	n/a	n/a	n/a	n/a
Number of exams for specialized medical imaging services – CT Scans	869	n/a	n/a	n/a

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Narrative Discussion of Indicators

Alcohol and Drug Treatment Completion Rates

Inpatient treatment for alcohol and drug problems occurs at Calder Centre in Saskatoon, a provincial service. Residents of Sunrise Health Region who receive that treatment demonstrate very high completion rates – although the sample sizes are suppressed for children due to small numbers and there were 20 adults. Outpatient treatment completion rates, for which sample sizes are much larger (347 total), are lower for Sunrise residents than the provincial average.

¹ For residents of Sunrise Health Region admitted to Calder Centre.

Genital Chlamydia Rate

The rate of genital Chlamydia in Sunrise Health Region is among the lowest of the health regions, for both males and females.

Influenza Immunization Rate

Influenza immunization rates in Sunrise Health Region are below the provincial average, and among the lowest of the health regions.

MRI and CT Scans

Sunrise Health Region does not operate an MRI machine, and only began operating a CT scan in January 2005. The CT scan is budgeted and staffed to provide 3,000 scans per year.

Challenges & Future Direction

There are a number of stark trends in the Sunrise Health Region and in regions across Saskatchewan. These trends are:

- Declining rural population, with most rural municipalities and small communities losing population, and even larger communities struggling to maintain population (at best);
- Increased operating costs, caused largely by the cost of collective agreements (not just in wages and benefits, but in many other non-compensation areas that contribute to the cost of doing business), drug and medical supply costs, and evolving/improving technology;
- A desire on the part of the public, and the government, to maintain services (particularly facility-based services) to the fullest extent possible.

The above three trends cannot continue together in the long term.

In the short term, in order to balance its budget, Sunrise Health Region has made operational decisions which are not sustainable in the long term. Positions are left vacant longer than they ordinarily would be, capital improvements are delayed or avoided altogether, education and training costs are constrained, and service areas of high priority are left unfunded or poorly funded.

One of the areas that holds the greatest potential for change in the Sunrise Health Region is long-term care. Currently the health region has more long-term care beds, per 1,000 people over age 75, than the provincial average; and within the region, there are communities that have far more beds than the average, and other communities that are underserved.

Over the course of the next year, Sunrise Health Region needs to engage specific communities in frank discussions concerning the future of long-term care services in their communities. It is the preference of the region to undertake change in a proactive and planned manner, and to treat long-term care residents, staff and the public with

consideration. However, the region cannot adequately engage in this discussion if there is an expectation that all facilities will remain open, and that no job reductions will occur.

There is also a possibility that, even in the absence of advanced dialogue and planning, change will occur. This will most likely be precipitated by staffing crises in our smaller facilities. Although the recruitment of nurses and other health care professionals has improved in recent years, for smaller communities and small facilities recruitment has continued to be extremely difficult. Because of the small number of staff at some of the smaller facilities, the retirement, relocation or resignation of even a few staff members may jeopardize the continued operation of those facilities.

Another issue of concern that is specific to Sunrise Health Region is that of its negative working capital. The Sunrise Regional Health Authority and Saskatchewan Health have agreed that addressing the negative working capital is a joint responsibility. The Sunrise Health Region is prevented from devoting resources to its working capital without an operating surplus. Achieving an operating surplus is extremely difficult without having a full range of management options available, including facility changes. An agreed-upon mid- to long-range strategy for accumulated debt and negative working capital must be a planning priority for fiscal year 2006/2007.

While all health regions will continue to struggle with the combined effects of changing demographics, high expectations and tight funding, there are also many positive issues to which time and energy will be devoted.

Sunrise Health Region continues to enjoy close and productive working relationships with other health regions, Saskatchewan Health, the Health Quality Council and professional bodies. These relationships have facilitated common approaches to service decisions and have resulted in much more of a provincial system of care.

Sunrise Health Region has a strategic plan that is aligned closely with the goals and objectives of the province. The four goals for Sunrise Health Region are:

- Improved Access to Quality Health Services
- Effective Health Promotion and Disease Prevention
- Retain, Recruit and Train Health Providers
- A Sustainable, Efficient, Accountable and Quality Health System.

The health region's Strategic Plan, including all key initiatives and progress to date in achieving those initiatives, is available at www.sunrisehealthregion.sk.ca.

Performance Management Summary

Indicator		Sunrise	Provincial Comparison	Range
Organizational Effectiveness Indicators				
2.1.1.1.	CCHSA current accreditation status for RHAs	Accreditation with Report	n/a	n/a
2.1.1.2.	Number of client contacts with the regional Quality of Care Coordinator to raise a concern 2003-04	164	n/a	n/a
2.1.1.3.	Percentage of concerns raised with a Quality of Care Coordinator concluded within 30 days 2003-04	84 %	87 %	25-90 %
2.1.1.8.	Number of sick leave hours per full time equivalent (FTE) PROVIDER UNIONS (CUPE; SEIU; SGEU) 2004-05	99.27	94.84	74.09-107.86
	Number of sick leave hours per full time equivalent (FTE) HSAS 2004-05	52.54	63.34	52.54-120.03
	Number of sick leave hours per full time equivalent (FTE) OOS/OTHER* 2004-05 * Category captures all non-unionized employees on the SAHO payroll system, not just management personnel	40.47	47.69	38.86-56.87
	Number of sick leave hours per full time equivalent (FTE) SUN 2004-05	81.04	93.07	70.00-98.43
2.1.1.9.	Number of wage driven premium hours (overtime and other premiums) per full time equivalent (FTE) PROVIDER UNIONS (CUPE; SEIU; SGEU) 2004-05	23.81	26.65	11.30-61.97
	Number of wage driven premium hours (overtime and other premiums) per full time equivalent (FTE) HSAS 2004-05	29.61	22.38	2.89-48.65
	Number of wage driven premium hours (overtime and other premiums) per full time equivalent (FTE) OOS/OTHER* 2004-05 * Category captures all non-unionized employees on the SAHO payroll system, not just management personnel	2.97	2.43	0.00-6.45

Indicator		Sunrise	Provincial Comparison	Range
	Number of wage driven premium hours (overtime and other premiums) per full time equivalent (FTE) SUN 2004-05	80.22	63.99	19.92-314.54
2.1.1.10.	Health system full time equivalents (FTEs) PROVIDER UNIONS (CUPE; SEIU; SGEU) 2004-05	1362.25	n/a	n/a
	Health system full time equivalents (FTEs) HSAS 2004-05	90.90	n/a	n/a
	Health system full time equivalents (FTEs) OOS/OTHER* 2004-05 * Category captures all non-unionized employees on the SAHO payroll system, not just management personnel	137.37	n/a	n/a
	Health system full time equivalents (FTEs) SUN 2004-05	357.42	n/a	n/a
2.1.1.11.	Number of lost-time WCB claims per 100 full time equivalents (FTEs) 2004-05	7.14	6.52	4.32-9.67
2.1.1.12.	Number of lost-time WCB days per 100 full time equivalents (FTEs) 2004-05	480.07	345.86	152.43-492.92
2.1.1.17.	Worked hours as a percentage of paid hours PROVIDER UNIONS (CUPE; SEIU; SGEU) 2004-05	79.5%	79.8%	78.5-81.5%
	Worked hours as a percentage of paid hours HSAS 2004-05	81.8%	82.0%	79.7-83.5%
	Worked hours as a percentage of paid hours OOS/OTHER* 2004-05 * Category captures all non-unionized employees on the SAHO payroll system, not just management personnel	82.6%	81.1%	69.5-83.7%
	Worked hours as a percentage of paid hours SUN 2004-05	78.6%	79.1%	77.3-85.4%
2.1.1.18.a	Working capital ratio 2004-05	0.45	n/a	0.45-1.69
2.1.1.18.b	Number of days able to operate with working capital 2004-05	(68.06)	n/a	(68.06)-28.83
2.1.1.19.	Surplus/deficit as a percentage of actual expenditure 2004-05	(0.3%)	n/a	(1.5%)-1.4%
2.1.1.21.	Budget versus actual expenditures ACUTE CARE funding pool 2004-05	\$83,019	n/a	n/a
	Budget versus actual expenditures SUPPORTIVE CARE funding pool 2004-05	(\$1,486,959)	n/a	n/a

Indicator		Sunrise	Provincial Comparison	Range
	Budget versus actual expenditures COMMUNITY BASED CARE funding pool 2004-05	\$700,479	n/a	n/a
	Budget versus actual expenditures PROGRAM SUPPORT funding pool 2004-05	\$550,603	n/a	n/a
Program-Specific Indicators				
Province Wide Services				
2.2.1.2.	Number of exams for specialized medical imaging services: magnetic resonance imaging (MRI) scans 2004-05	n/a	n/a	n/a
2.2.1.3.	Number of exams for specialized medical imaging services: computed tomography (CT) scans 2004-05	869	n/a	n/a
2.2.1.4.	Average wait time for admission to Saskatchewan Hospital North Battleford (SHNB) 2004	63 days	59 days	41-76 days
2.2.1.6.	Alcohol and drug inpatient treatment completion rate per 100 admissions – Calder Centre Child and Youth 2003-04	—	61.6 %	44.4%-91.7%
	Alcohol and drug inpatient treatment completion rate per 100 admissions – Calder Centre Adults 2003-04	95.5%	70.3 %	50.0%-95.5%
Acute Care Services				
2.2.2.3.a	Number of surgical cases 2004-05	3186	68,454	n/a
2.2.2.3.b	Percentage of surgical cases performed as day surgery 2004-05	66.0%	53.0%	48.0-66.0%
2.2.2.4.	Percentage of surgical cases completed within 6 months 2004-05	97.0%	81.0%	74.0-100.0%
	Percentage of surgical cases completed within 12 months 2004-05	100.0%	91.0%	85.0-100.0%
	Percentage of surgical cases completed within 18 months 2004-05	100.0%	95.0%	93.4-100.0%
Institutional Supportive Care Services				
2.2.4.5.	Prevalence of pressure sores: percentage of institutional supportive care residents with pressure sores Q2 2004-05 (Quarterly Report – October 2004)	22.7%	21.8%	12.7%-29.1%

Indicator		Sunrise	Provincial Comparison	Range
Population Health Services				
2.2.6.1.	Percentage of eligible population receiving immunization at second birthday (vaccine coverage rate) DIPHTHERIA 2004* * NOTE: SIMS does not capture on-reserve immunizations	75.2%	73.3%	57.3%-86.3%
	Percentage of eligible population receiving immunization at second birthday (vaccine coverage rate) MEASLES 2004* * NOTE: SIMS does not capture on-reserve immunizations	71.0%	71.7%	57.3-85.6%
2.2.6.6.	Genital Chlamydia rate per 100,000 population MALES 2003	66.1	268.1	27.4 – 3,259.0
	Genital Chlamydia rate per 100,000 population FEMALES 2003	169.1	473.4	53.8 – 5,784.4
2.2.6.7.	Influenza immunization rate per 100 population (age 65 years and over) 2003-04	61.9	65.8	56.8-72.8
2.2.6.8.	Population health promotion plan approved by RHA boards and submitted as part of health region operational plans (fall 2004) [yes/no indicator]	Yes	n/a	n/a
	Population health promotion plan progress report submitted March 31, 2005 [yes/no indicator]	Yes	n/a	n/a
Community Care Services				
2.2.7.2.	Alcohol and drug outpatient treatment completion rate per 100 admissions 2003-04	57.5	58.4	43.7-72.6
Primary Health Services				
2.2.9.1.	Percentage of the population served by primary health care teams March 2005	0.00%	23.89%	0.00% – 100.00%
2.2.9.3.	Total number of new primary health care teams in the current fiscal year 2004/2005	0	n/a	n/a
2.2.9.4.	Regional Operational / Budget Plan includes an updated Primary Health Care Plan that identifies the location of primary health care teams 2004-05 [yes/no indicator]	Yes	n/a	n/a

Indicator		Sunrise	Provincial Comparison	Range
2.2.9.5.	Regional Operational / Budget Plan includes an updated Diabetes Management Plan 2004-05 [yes/no indicator]	Yes	n/a	n/a
2.2.9.6.	Regional Operational / Budget Plan outlines potential financial requirements 2004-05 [yes/no indicator]	Yes	n/a	n/a
2.2.9.7.	Regional Health Authorities participated in 3-year and 5-year evaluations of demonstration sites, as required 2004-05 [yes/no indicator]	n/a	n/a	n/a
Emergency Response Services				
2.2.10.1.	Percentage of ambulance calls responded to where at least one of the emergency medical service providers has at least basic-EMT level training 2003-04	98.87%	98.76%	70.17% – 100.00%
Mental Health and Addiction Services				
2.2.11.2.	Mental health inpatient readmission rate per 100 mental health inpatient separations 2003-04	22.8	20.2	17.9-26.3
2.2.11.3.	Alcohol and drug inpatient treatment completion rate per 100 admissions 2003-04	n/a	68.2	62.3 – 79.4
Program Support Services				
2.2.13.1.	Administrative expenditures in program support funding pool as a percentage of overall base operating funds 2004-05	4.3%	n/a	3.6%-11.5%
Health Status and Outcome Indicators				
3.1.1.1.	Infant mortality rate per 1,000 live births 1998-2002	2.34	6.24	1.70 – 15.66
3.1.1.2.a	Low birth weight rate per 100 live births 1998-2002	4.34	5.26	4.34 – 6.19
3.1.1.2.b	High birth weight rate per 100 live births 1998-2002	15.4	15.7	13.1 – 26.7
3.1.1.4.a	Disability-free life expectancy (at birth) MALES 1996	66.8	66.6	61.8 – 69.2
	Disability-free life expectancy (at birth) FEMALES 1996	70.1	70.0	63.2 – 72.5
3.1.1.4.b	Disability-free life expectancy (at age 65 years) MALES 1996	11.4	11.2	8.7 – 12.1

Indicator		Sunrise	Provincial Comparison	Range
	Disability-free life expectancy (at age 65 years) FEMALES 1996	12.4	12.7	8.4 – 13.2
3.1.1.5.a	Life expectancy (at birth) MALES 2001	75.6	76.2	72.1 – 78.2
	Life expectancy (at birth) FEMALES 2001	82.2	81.8	76.1 – 82.8
3.1.1.5.b	Life expectancy (at age 65 years) MALES 2001	16.6	16.9	15.6 – 18.0
	Life expectancy (at age 65 years) FEMALES 2001	20.8	20.9	17.2 – 21.8
3.1.1.6.	Self-rated health status: percentage of population (age 12 years and over) who report their health as very good or excellent 2003	47.6%	59.5%	42.0% – 53.2%
3.1.1.7.	Percentage of population (age 12 years and over) who are current, daily or occasional smokers MALES 2003	22.6%	24.6%	20.8% – 40.7%
	Percentage of population (age 12 years and over) who are current, daily or occasional smokers FEMALES 2003	23.3%	23.1%	11.6% – 42.0%
3.1.1.8.a	Percentage of population (age 18 to 64 years) who are overweight (BMI 25.0-29.9) 2003	38.3%	35.8%	31.7% – 41.8%
3.1.1.8.b	Percentage of population (age 20 to 64 years) who are obese (BMI 30.0+) 2003	25.3%	20.5%	16.4% – 27.2%
3.1.1.10.a	Percentage of population (age 12 years and over) who report physical activity participation levels of active / moderately active 2003	44.7%	49.8%	41.7% – 56.1%
3.1.1.10.b	Percentage of population (age 12 years and over) who report physical activity participation levels of inactive 2003	53.0%	47.8%	41.0% – 56.4%
3.1.1.12.	Age-adjusted diabetes prevalence rate per 1,000 population 2001-02	39.9	n/a	29.5 – 72.5
3.1.1.13.	Injury hospitalization rate per 1,000 population (age 0 to 19 years) MALES 2002-03	10.0	9.3	6.7 – 17.6
	Injury hospitalization rate per 1,000 population (age 0 to 19 years) FEMALES 2002-03	7.2	6.5	4.6 – 12.0
3.1.1.14.	Hospitalization rate due to falls per 1,000 population (age 65 years and over) MALES 2002-03	13.8	13.4	0.0 – 35.0

Indicator		Sunrise	Provincial Comparison	Range
	Hospitalization rate due to falls per 1,000 population (age 65 years and over) FEMALES 2002-03	27.1	25.1	0.0 - 48.2

Management Report

Date: April 29, 2005

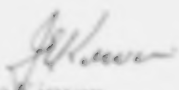
Sunrise Health Region
Report of Management

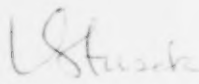
The accompanying financial statements are the responsibility of management and are approved by the Sunrise Regional Health Authority. The financial statements have been prepared in accordance with Canadian Generally Accepted Accounting Principles and the Financial Reporting Guide issued by Saskatchewan Health and, of necessity, includes amounts based on estimates and judgments. The financial information presented in the annual report is consistent with the financial statements.

Management maintains appropriate systems of internal control, including policies and procedures, which provide reasonable assurance that the region's assets are safeguarded and the financial records are relevant and reliable.

The Authority is responsible for reviewing the financial statements and overseeing Management's performance in financial reporting. The Authority meets with Management and the external auditors to discuss and review financial matters. The Authority approves the financial statements and the annual report.

The appointed auditor conducts an independent audit of the financial statements and has full and open access to the *Finance/Audit Committee*. The auditor's report expresses an opinion on the fairness of the financial statements prepared by Management.


Joe Kirwan
Chief Executive Officer


Lorelei Stusek
Executive Director of Finance and
Information Services

FINANCIAL
INFORMATION

**FINANCIAL
STATEMENTS**

Sunrise Regional Health Authority

Year Ended March 31, 2005

Sunrise Regional Health Authority
Yorkton, Saskatchewan
March 31, 2005

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PARKERQUINE LLP
Chartered Accountants Business Advisors

Auditors' Report

To the board of directors
Sunrise Regional Health Authority

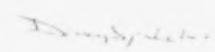
We have audited the Consolidated Statement of Financial Position of Sunrise Regional Health Authority as at March 31, 2005 and the Consolidated Statements of Operations and Changes in Fund Balances and Cash Flow for the year then ended. The health authority's management is responsible for preparing the financial statements. Our responsibility is to express an opinion on these financial statements based on our audit.

We have conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of Sunrise Regional Health Authority as at March 31, 2005 and the results of its operations and the changes in cash flow for the year then ended in accordance with Canadian generally accepted accounting principles.

PARKERQUINE LLP

Yorkton, SK
April 29, 2005

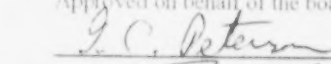
Per: 

Sunrise Regional Health Authority
Consolidated Statement of Financial Position
As at March 31, 2005

Statement 1

	<u>Restricted Funds</u>				
	<u>Operating</u>	<u>Capital</u>	<u>Community</u>	<u>Total</u>	<u>Total</u>
	<u>Fund</u>	<u>Fund</u>	<u>Trust and</u>	<u>2005</u>	<u>2004</u>
			<u>Endowment</u>		
			<u>Funds</u>		
Assets					
Current Assets					
Cash and short-term investments (schedule 2)	303,822	3,469,544	1,590,116	5,363,482	3,745,288
Accounts receivable					
Saskatchewan Health	118,249	2,353,018		2,471,267	8,424,722
Other	1,631,408	1,995,400	4,153	3,630,961	2,189,661
Inventories	1,431,812			1,431,812	1,272,479
Prepaid expenses	<u>527,591</u>			<u>527,591</u>	<u>686,883</u>
	<u>4,012,882</u>	<u>7,817,962</u>	<u>1,594,269</u>	<u>13,425,113</u>	<u>16,319,033</u>
Investments (schedule 2)					
Market \$450,250 (2004 - \$657,400)	301,546	106,199	42,500	450,245	657,401
Capital Assets (note 3)	<u>0</u>	<u>70,901,673</u>	<u>0</u>	<u>70,901,673</u>	<u>58,874,399</u>
Total Assets	<u>\$ 4,314,428</u>	<u>\$ 78,825,834</u>	<u>\$ 1,636,769</u>	<u>\$ 84,777,031</u>	<u>\$ 75,850,833</u>
Liabilities and Fund Balances					
Current Liabilities					
Bank indebtedness [note 13(d)]	11,083,176			11,083,176	11,910,502
Accounts payable	2,881,534	1,314,225		4,195,759	2,900,736
Accrued salaries	3,479,400			3,479,400	4,494,438
Vacation payable	8,342,528			8,342,528	7,833,226
Other accrued liabilities	594,236	60,903		655,139	716,196
Mortgages and leases payable - current (notes 4 and 5)		894,200		894,200	929,855
Deferred revenue (note 6)	<u>1,106,953</u>	<u>20,318</u>		<u>1,127,271</u>	<u>1,099,673</u>
	<u>27,487,827</u>	<u>2,289,646</u>	<u>0</u>	<u>29,777,473</u>	<u>29,884,626</u>
Long-Term Liabilities					
Mortgages payable (note 5)	<u>0</u>	<u>12,404,290</u>	<u>0</u>	<u>12,404,290</u>	<u>13,306,982</u>
Total Liabilities	<u>27,487,827</u>	<u>14,693,936</u>	<u>0</u>	<u>42,181,763</u>	<u>43,191,608</u>
Fund Balances - statement 2					
Invested in capital assets		57,603,183		57,603,183	44,637,562
Externally-restricted (schedule 3)		569,161	1,636,769	2,205,930	2,513,798
Internally-restricted (schedule 4)	26,935	5,959,554		5,986,489	7,918,489
Unrestricted	<u>(23,200,334)</u>			<u>(23,200,334)</u>	<u>(22,410,624)</u>
	<u>(23,173,399)</u>	<u>64,131,898</u>	<u>1,636,769</u>	<u>42,595,268</u>	<u>32,659,225</u>
Total Liabilities and Fund Balances	<u>\$ 4,314,428</u>	<u>\$ 78,825,834</u>	<u>\$ 1,636,769</u>	<u>\$ 84,777,031</u>	<u>\$ 75,850,833</u>

Approved on behalf of the board of directors




See accompanying notes to the financial statements.

Sunrise Regional Health Authority
Consolidated Statement of Operations and Changes in Fund Balances
For the year ended March 31, 2005

Statement 2

	Operating Fund		Restricted Funds			
	Budget 2005 (note 12)	Total 2005	Total 2004 (note 10)	Capital Fund 2005	Trust and Endowment Funds 2005	Total 2005 Total 2004
Revenue						
Saskatchewan Health - general	111,180,349	111,125,999	105,839,572	9,766,976		6,908,104
Other provincial	439,951	394,529	366,146	294,925		293,088
Federal government	84,692	47,030	46,705			
Special funded programs	1,787,045	1,529,201	1,493,724			
Patient fees	11,250,390	11,317,038	11,215,107			
Out-of-province (reciprocal)	2,092,431	1,450,528	1,712,394			
Out-of-country	26,627	35,705	6,957			
Transfers from foundations/donations	18,000	83,464	60,877	5,057,716		1,185,291
Investment income	4,000	60,903	42,386	65,104		127,134
Ancillary operations	24,500	24,696	20,804			
Recoveries	2,233,274	2,658,165	2,175,227			
Other	39,365	71,455	98,334	56,267		327,183
	<u>129,180,624</u>	<u>128,798,713</u>	<u>123,078,233</u>	<u>15,240,988</u>	<u>47,785</u>	<u>8,840,800</u>
Expenses (schedule 1)						
Province-wide acute-care services						
Acute-care services	1,333,275	1,237,196	936,790	1,959,672		1,904,440
Physician compensation - acute	45,664,120	45,929,314	43,524,997			
Supportive-care services	3,523,684	3,271,550	2,225,841			
Home-based services - supportive care	45,146,131	46,836,689	45,349,597	2,117,842	1,763	2,053,542
Population-health services	7,130,532	6,926,933	6,594,595	25,869		13,524
Community-care services	3,262,692	3,113,953	3,097,477	11,640		10,337
Home-based services - acute and palliative	5,724,261	5,573,580	5,366,991	8,552		16,162
Primary health care services	1,550,686	1,470,730	1,418,580	11,951		29,273
Emergency-response services	1,006,225	818,253	722,793	58,906	60,633	3,089
Mental health services - inpatient	3,399,295	3,287,612	3,192,190	39,795		59,540
Physician compensation - community	1,768,110	1,706,560	1,606,868			
Program-support services	1,264,772	1,304,874	1,085,309			
Special funded programs	6,060,581	5,509,978	5,461,033	469,297	1,000	570,990
Ancillary	1,732,192	1,573,350	1,705,251			
	<u>614,068</u>	<u>652,856</u>	<u>451,122</u>	<u>171,093</u>	<u>63,396</u>	<u>223,102</u>
	<u>129,180,624</u>	<u>129,213,428</u>	<u>122,739,434</u>	<u>4,874,617</u>	<u>4,938,013</u>	<u>4,883,999</u>
Excess (Deficiency) of Revenue over Expenses						
Fund balances (deficiency), beginning of year	0	(414,715)	338,799	10,366,371	(15,611)	3,956,801
Interfund transfers (note 14)		(22,216,261)	(22,247,214)	52,715,528	2,159,956	50,610,841
		(542,423)	(307,846)	1,049,999	(507,576)	307,846
Fund Balances (Deficiency), End of Year		<u>\$ 23,173,999</u>	<u>\$ 22,216,261</u>	<u>\$ 64,131,898</u>	<u>\$ 1,636,769</u>	<u>\$ 54,875,488</u>

See accompanying notes to the financial statements.

Sunrise Regional Health Authority
Consolidated Statement of Cash Flow
For the year ended March 31, 2005

Statement 3

	<u>Operating Fund</u>		<u>Restricted Funds</u>			
	2005	2004 (Note 10)	Capital Fund	Community Trust and Endowment Funds	Total 2005	Total 2004 (Note 10)
Cash Provided By (Used In):	Operating Activities		Financing and Investing Activities			
Excess (deficiency) of revenue over expenses	(414,715)	338,799	10,366,371	(15,611)	10,350,760	3,956,801
Net change in non-cash working capital (note 7)	1,659,888	1,555,356	3,607,186	865	3,608,051	(4,277,707)
Amortization of capital assets			4,133,539		4,133,539	3,927,838
Loss (gain) on disposal of capital assets			(11,471)		(11,471)	56,563
	<u>1,245,173</u>	<u>1,894,155</u>	<u>18,095,625</u>	<u>(14,746)</u>	<u>18,080,879</u>	<u>3,663,495</u>
Purchase of capital assets						
Buildings/construction			(13,712,622)		(13,712,622)	(2,345,878)
Equipment			(2,551,885)		(2,551,885)	(1,881,202)
Proceeds on disposal of capital assets						
Buildings			50,000		50,000	47,364
Equipment			65,165		65,165	1,920
Disposal (purchase) of long-term investments	<u>208,255</u>	<u>(163,486)</u>	<u>(22,599)</u>	<u>21,500</u>	<u>(1,099)</u>	<u>50,355</u>
	<u>208,255</u>	<u>(163,486)</u>	<u>(16,171,941)</u>	<u>21,500</u>	<u>(16,150,441)</u>	<u>(4,127,441)</u>
Repayment of debt	<u>0</u>	<u>0</u>	<u>(938,346)</u>	<u>0</u>	<u>(938,346)</u>	<u>(1,268,666)</u>
Net Increase (Decrease) in Cash and Short-Term Investments during the Year	1,453,428	1,730,669	985,338	6,754	992,092	(1,732,612)
Cash and short-term investments, beginning of year	(11,690,359)	(13,113,182)	1,434,207	2,090,938	3,525,145	4,949,911
Interfund transfers (note 14)	(542,423)	(307,846)	1,049,999	(507,576)	542,423	307,846
Cash and Short-Term Investments, End of Year	<u>\$ (10,779,354)</u>	<u>\$ (11,690,359)</u>	<u>\$ 3,469,544</u>	<u>\$ 1,590,116</u>	<u>\$ 5,059,660</u>	<u>\$ 3,525,145</u>
Represented By:						
Cash and short-term investments	303,822	220,143	3,469,544	1,590,116	5,059,660	3,525,145
Bank indebtedness	<u>(11,083,176)</u>	<u>(11,910,502)</u>				
	<u>\$ (10,779,354)</u>	<u>\$ (11,690,359)</u>	<u>\$ 3,469,544</u>	<u>\$ 1,590,116</u>	<u>\$ 5,059,660</u>	<u>\$ 3,525,145</u>

See accompanying notes to the financial statements.

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

1. Legislative Authority

On August 1, 2002, the Legislative Assembly passed *The Regional Health Services Act* (Act). This Act created the Regional Health Authorities for the purpose of governing the delivery of health services as well as establishing and governing health regions and Regional Health Authorities in the province of Saskatchewan.

On coming into force, the Act terminated the membership of the individual District Health Boards. All assets, liabilities, rights and obligations of the District Health Boards continue as the assets, liabilities, rights and obligations of the Regional Health Authority. All contracts with the District Health Boards remain in effect until repealed or replaced by the Regional Health Authorities.

The Sunrise Regional Health Authority (RHA) was created by the Act. The Sunrise Regional Health Authority is responsible for the planning, organization, delivery and evaluation of health services it is to provide (the Act Section 27) within the geographic area known as the Sunrise Health Region.

2. Significant Accounting Policies

These financial statements have been prepared in accordance with Canadian generally accepted accounting principles and include the following significant accounting policies:

(a) Health care organizations

- i) The RHA has agreements with and grants funding to the following Community Based Organizations (CBO's) and third parties to provide health services:
 - Parkland Alcohol & Drug Abuse Society Inc.
 - Society for Involvement of Good Neighbours Inc.
 - Canadian Mental Health Association

Note 9 b) i) provides disclosure of payments to CBO'S and third parties.

For the Saul Cohen Family Resource Centre Inc., the RHA has an economic influence. As a result, the financial statements of Saul Cohen Family Resource Centre Inc. are combined with the financial statements of the RHA.

- ii) The RHA has Joint Service Management Agreements with all three of its affiliates; St. Anthony's Hospital, St. Peter's Hospital and St. Paul Lutheran Home of Melville. The purpose of the agreements is to share management, contract human resources and finance services to the affiliates.

As a result, the financial statements of St. Anthony's Hospital, St. Peter's Hospital and St. Paul Lutheran Home of Melville are combined with the financial statements of the RHA. Transactions and interorganizational balances between the RHA and St. Anthony's Hospital, St. Peter's Hospital and St. Paul Lutheran Home of Melville are eliminated.

Note 9 b) ii) provides supplementary information regarding the financial position, results of operations and cash flows of the combined affiliates.

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

2. Significant Accounting Policies (continued)

(a) Health care organizations (continued)

- iii) The Health Foundation of East Central Saskatchewan Inc., St. Peter's Hospital Foundation (Melville) Inc. and St. Anthony's Hospital Foundation Inc. (the Foundations) are incorporated under *The Non-Profit Corporations Act* and are registered charities under *The Income Tax Act*.

Under the Foundations' Articles of Incorporation, the RHA or the respective affiliates have an economic interest in the Foundations.

These financial statements do not include the financial activities of the Foundations. Alternatively, note 9 b) iii) provides supplementary information of the Foundations.

(b) Fund accounting

The accounts of the RHA are maintained in accordance with the restricted fund method of accounting for contributions. For financial reporting purposes, accounts with similar characteristics have been combined into the following major funds:

i) Operating fund

The operating fund reflects the primary operations of the RHA including revenues received for provision of health services from Saskatchewan Health - General Revenue Fund, and billings to patients, clients, the federal government and other agencies for patient and client services. Other revenue consists of donations, recoveries and ancillary revenue. Expenses are for the delivery of health services.

ii) Capital fund

The capital fund is a restricted fund that reflects the equity of the RHA in capital assets after taking into consideration any associated long-term debt. The capital fund includes revenues received from Saskatchewan Health - General Revenue Fund designated for construction of capital projects and/or the acquisition of capital assets. The capital fund also includes donations designated for capital purposes by the contributor. Expenses consist primarily of interest on long-term mortgages and amortization of capital assets.

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

2. Significant Accounting Policies (continued)

(b) Fund accounting (continued)

iii) Community Trust and Endowment Fund

Community Trust

The community trust fund is a restricted fund that reflects community-generated assets transferred to the RHA in accordance with the pre-amalgamation agreements signed with the amalgamating health corporations. The assets include cash and investments initially accumulated by the health corporations in the district from donations or municipal tax levies. These assets are accounted for separately and use of the assets is subject to restrictions set out in pre-amalgamation agreements between the RHA and the health corporations.

Endowment Fund

Under the terms of the will of the late Dr. Borys Tolczynski, the RHA administers an endowment fund. The interest from this fund is to be used for education and training expenditures which benefit the health district. Unexpended interest each year is added to the endowment principal. The RHA cannot encroach upon the original endowment bequest of \$201,771 plus unexpended interest except in special circumstances.

(c) Revenue

Unrestricted contributions are recognized as revenue in the operating fund in the year received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Restricted contributions related to general operations are deferred and recognized as revenue of the operating fund in the year in which the related expenses are incurred. All other restricted contributions are recognized as revenue of the appropriate restricted fund in the year.

(d) Capital assets

Capital assets are recorded at cost. Normal maintenance and repairs are expensed as incurred. Capital assets are amortized on a straight-line basis over their estimated useful lives as follows:

Land improvements	4% to 10%
Buildings and service equipment	2% to 4%
Equipment	4% to 25%

Donated capital assets are recorded at their fair value at the date of contribution (if fair value can be reasonably determined).

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

2. Significant Accounting Policies (continued)

(e) Inventories

Inventories consist of general stores, pharmacy, laboratory, linen and other. All inventories are valued at the lower of cost and net realizable value. Cost is determined on an average-cost basis.

(f) Investments

Investments are valued at the lower of cost or net realizable value.

(g) Pension

Employees of the RHA participate in several multi-employer defined benefit pension plans or a defined contribution plan. The RHA follows defined contribution plan accounting for its participation in the plans. Accordingly, the RHA expenses all contributions it is required to make in the year.

(h) Measurement uncertainty

These financial statements have been prepared by management in accordance with Canadian generally accepted accounting principles. In the preparation of financial statements, management makes various estimates and assumptions in determining the reported amounts of assets and liabilities, revenues and expenses and in the disclosure of commitments and contingencies. Changes in estimates and assumptions will occur based on the passage of time and the occurrence of certain future events. The changes will be reported in earnings in the period in which they become known.

3. Capital Assets

	<u>March 31, 2005</u>		<u>2004</u>
	<u>Cost</u>	<u>Accumulated Amortization</u>	<u>Net Book Value</u>
Land	246,528		246,528
Land improvements	752,857	622,918	129,939
Buildings and service equipment	83,916,629	35,827,071	48,089,558
Equipment	39,532,447	30,985,465	8,546,982
Construction in progress	<u>13,888,666</u>		<u>13,888,666</u>
	<u>\$ 138,337,127</u>	<u>\$ 67,435,454</u>	<u>\$ 70,901,673</u>
			<u>\$ 58,874,399</u>

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

4. Commitments

(a) Capital asset acquisitions

At March 31, 2005, commitments for acquisition of capital assets were \$960,215 (2004 - \$575,879).

(b) Supplier payments

At March 31, 2005, commitments for outstanding purchase orders were \$745,013 (2004 - \$168,801).

(c) Capital projects

The RHA has approved a capital project for health services based in Yorkton with a budgeted cost of \$18,093,200. This project includes additions to the Yorkton and District Nursing Home to allow for the relocation of 93 long-term care beds from other locations in Yorkton, the addition to, or renovation of, facilities to relocate other health-care services provided by the region and the acquisition of furniture and equipment totalling \$418,700. At March 31, 2005, costs incurred total \$13,864,918 and are included in construction in progress in these financial statements. Funding from Saskatchewan Health of \$11,488,000 has been recognized in these financial statements with the balance of funding from fund-raising events and donations from individuals, municipalities and corporations covering the balance. The project is expected to be substantially complete by May 31, 2005.

The RHA has been approved to proceed with the planning phase of the Preeceville Integrated Health Facility with a budget of \$700,000. This planning phase will include a needs assessment, functional program and architectural drawings for the replacement of the Preeceville Lions Housing and the Preeceville Hospital. As at March 31, 2005, costs incurred total \$23,748 and are included in construction in progress in these financial statements.

(d) Operating leases

Minimum annual rentals under operating leases on property and equipment over the next five years are as follows:

2006	\$ 406,261
2007	331,799
2008	222,588
2009	143,116
2010	66,969

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

4. **Commitments (continued)**

(e) **Capital leases**

The RHA leases medical equipment under a capital lease arrangement. Interest expense related to the capital lease obligations totalled \$1,012 in 2005 (2004 - \$2,934).

5. **Mortgages Payable**

Title of Issue	Interest	Annual Repayment Terms (Principal and Interest)	Balance Outstanding	
	Rate		2005	2004
Yorkton and District Nursing Home CMHC, due September 1, 2018	5.875%	\$23,481, mortgage renewal date - September 1, 2018	219,409	229,825
CMHC, due June 1, 2027	8.000%	\$69,670, mortgage renewal date - June 1, 2027	730,725	742,386
CMHC, due November 1, 2022	5.420%	\$163,120 of which \$57,689 is subsidized by SHC; yielding an effective interest rate of 2.29%; mortgage renewal date - December 1, 2012	1,860,111	1,921,933
Foam Lake Jubilee Home CMHC, due February 1, 2008	7.500%	\$5,834, mortgage renewal date - February 1, 2008	11,266	16,073
CMHC, due May 1, 2017	5.750%	\$10,911, mortgage renewal date - May 1, 2017	95,682	100,991
CMHC, due January 1, 2022	4.970%	\$42,712 of which \$13,119 is subsidized by SHC; yielding an effective interest rate of 2.26%; mortgage renewal date - December 1, 2006	488,149	506,408
Lakeside Manor Care Home CMHC, due August 1, 2021	4.86%	\$96,473 of which \$31,472 is subsidized by SHC; yielding an effective interest rate of 1.97%; mortgage renewal date - December 1, 2006	1,093,187	1,136,047
Theodore Health Centre CMHC, due December 1, 2023	4.54%	\$50,070 of which \$9,834 is subsidized by SHC; yielding an effective interest rate of 3.32%; mortgage renewal date - February 1, 2015	633,286	650,664

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

5. Mortgages Payable (continued)

Title of Issue	Interest Rate	Annual Repayments Terms (Principal and Interest)	Balance Outstanding	
			2005	2004
Centennial Special Care Home CMHC, due September 1, 2026	8.000%	\$27,884, mortgage renewal date - September 1, 2026	288,725	293,674
CMHC, due April 1, 2022	5.790%	\$56,944 of which \$21,458 is subsidized by SHC; yielding an effective interest rate of 2.30%; mortgage renewal date - March 1, 2007	619,857	640,757
Invermay Health Centre CMHC, due March 1, 2017	5.620%	\$28,797 of which \$10,197 is subsidized by SHC; yielding an effective interest rate of 1.60%; mortgage renewal date - June 1, 2006	251,838	266,237
CMHC, due May 1, 2022	5.620%	\$41,294 of which \$10,850 is subsidized by SHC; yielding an effective interest rate of 3.19%; mortgage renewal date - June 1, 2006	455,245	470,829
Norquay Health Centre CMHC, due March 1, 2017	5.620%	\$28,152 of which \$9,177 is subsidized by SHC; yielding an effective interest rate of 1.91%; mortgage renewal date - June 1, 2006	246,197	260,274
CMHC, due July 1, 2022	5.620%	\$42,319 of which \$11,124 is subsidized by SHC; yielding an effective interest rate of 3.21%; mortgage renewal date - June 1, 2006	469,799	485,595
Carleton Place Lodge CMHC, due January 1, 2023	7.250%	\$30,450, mortgage renewal date - January 1, 2023	306,575	314,805
CMHC, due April 1, 2017	5.620%	\$52,327 of which \$20,393 is subsidized by SHC; yielding an effective interest rate of 1.22%; mortgage renewal date - June 1, 2006	459,753	485,802
Kennock Nursing Home Bank Finance, due June 1, 2005	5.375%	\$4,708, mortgage renewal date - June 1, 2005	4,467	8,022
Bank Finance, due May 1, 2007	5.375%	\$307, mortgage renewal date - May 1, 2007	829	1,006
CMHC, due February 1, 2017	4.910%	\$92,034 of which \$25,200 is subsidized by SHC; yielding an effective interest rate of 2.03%; mortgage renewal date - March 1, 2007	830,824	881,223

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

5. Mortgages Payable (continued)

Title of Issue	Interest Rate	Annual Repayment Terms (Principal and Interest)	Balance Outstanding	
			2005	2004
Preeceville Lions Housing CMHC, due May 1, 2016	5.375%	\$5,115, mortgage renewal date - May 1, 2016	43,003	45,752
CMHC, due July 1, 2005	5.375%	\$6,435, mortgage renewal date - July 1, 2005	2,117	8,262
CMHC, due March 1, 2008	5.620%	\$50,275 of which \$13,293 is subsidized by SHC; yielding an effective interest rate of 0.00%; mortgage renewal date - March 1, 2006	138,671	180,002
St. Paul Lutheran Home of Melville CMHC, due June 1, 2018	5.750%	\$15,859, mortgage renewal date - June 1, 2018	147,405	154,663
CMHC, due August 1, 2022	5.520%	\$112,991 of which \$43,388 is subsidized by SHC; yielding an effective interest rate of 2.08%; mortgage renewal date - September 1, 2012	1,268,208	1,310,860
St. Peter's Facility Melville Credit Union	5.000%	\$1,384	1,384	53,432
Ituna & District Pioneer Lodge CMHC, due April 1, 2025	8.000%	\$28,656, mortgage renewal date - April 1, 2025	289,256	294,902
Esterhazy Centennial Special Care Home CMHC, due July 1, 2019	6.875%	\$20,918, mortgage renewal date - July 1, 2019	191,479	199,133
CMHC, due August 1, 2022	4.220%	\$46,712 of which \$11,159 is subsidized by SHC; yielding an effective interest rate of 2.27%. Mortgage renewal date - December 1, 2007	576,920	599,044
East Central Regional Laundry Bank of Montreal, due January 1, 2009	4.24%	\$445,496, mortgage renewal date - January 1, 2009	1,574,123	1,945,081
Less: Current portion			13,298,490 894,200	14,203,682 896,700
			<u>\$ 12,404,290</u>	<u>\$ 13,306,982</u>

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

5. Mortgages Payable (continued)

For each of the mortgages, the RHA has pledged the related buildings of the facilities as security. Principal amounts due in each of the next five years are estimated as follows:

2006	\$ 894,200
2007	919,100
2008	965,500
2009	888,900
2010	553,400
2011 and subsequent	9,077,392

6. Deferred Revenue

Program	Balance, Beginning of Year	Amount Recognized from Sask. Health	Amount Received from Sask. Health	Amount Recognized from Other Sources	Amount Received from Other Sources	Balance, End of Year
Kids First	185,304	937,359	989,110	15,000	15,000	237,055
Diabetes care and prevention	180,210	142,466	47,500			85,244
Healthline			3,500			3,500
High quality workplace			53,358			53,358
Needle exchange	11,409	1,778				9,631
CTAS tracking system	20,000					20,000
Acquired brain injury	13,383			53,438	67,310	27,255
Community resources					5,000	5,000
Medical remuneration	245,000	113,022				131,978
Population health promotion		3,769	22,000			18,231
Other initiatives	6,620			6,620		
Rent received in advance	44,701			7,577		37,124
Primary healthcare transition fund	63,899	194,313	245,000			114,586
Primary health team facilitator	78,600					78,600
Wellness initiatives	65,363	65,363				
Teen wellness	4,982			19,122	22,500	8,360
Tobacco enforcement		14,113	19,000			4,887
Quality health workplace initiatives		3,688	76,145			72,457
SIMS, PHIS, environment			10,000			10,000
Family resource	20,960			56,960	36,000	
Youth liaison	3,224			13,224	10,000	
PH information system	5,131	5,131				
Informal consultations on needle use	5,000	5,000				
Assist program				1,528	2,315	787
Aboriginal awareness training	14,640	17,097	24,949		7,820	22,492
S.R.N.A grant						7,820
Sunrise cookbooks	3,665			3,665		
Clinical education and training	106,562	8,457	60,483			158,588
	1,078,653	1,511,556	1,551,045	177,134	165,945	1,106,953
Sask. Housing Corporation mortgage subsidy	21,020	0	0	702	0	20,318
	<u>\$ 1,099,673</u>	<u>\$ 1,511,556</u>	<u>\$ 1,551,045</u>	<u>\$ 177,836</u>	<u>\$ 165,945</u>	<u>\$ 1,127,271</u>

Restricted funding related to general operations from Saskatchewan Health - General Revenue Fund is recorded as revenue as the related costs are incurred.

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

7. Net Change in Non-Cash Working Capital

	<u>Operating Fund</u>		<u>Restricted Funds</u>			<u>Total</u> 2004
	2005	2004	Capital Fund	Community Trust and Endowment Funds	Total 2005	
Decrease (increase)						
- accounts receivable	2,211,209	(590,367)	2,300,079	865	2,300,944	(4,087,043)
- inventory	(159,333)	(63,394)				
- prepaid expenses	159,292	137,344				
Increase (decrease)						
- accounts payable	(19,202)	1,302,177	1,314,225		1,314,225	(118,408)
- accrued liabilities	(560,378)	912,183	(6,416)		(6,416)	(93,276)
- deferred revenue	28,300	(142,587)	(702)		(702)	21,020
	<u>\$ 1,659,888</u>	<u>\$ 1,555,356</u>	<u>\$ 3,607,186</u>	<u>\$ 865</u>	<u>\$ 3,608,051</u>	<u>\$ 4,277,707</u>

8. Patient and Resident Trust Accounts

The RHA administers funds held in trust for patients and residents utilizing the RHA's facilities. The total cash held in trust as at March 31, 2005 was \$266,547 (2004 - \$249,559). These amounts are not reflected in the financial statements.

9. Related Parties

These financial statements include transactions with related parties. The RHA is related to all Saskatchewan crown agencies such as departments, corporations, boards and commissions under the common control of the government of Saskatchewan. The RHA is also related to non-crown enterprises that the government jointly controls or significantly influences. In addition, the RHA is related to other non-government organizations by virtue of its economic interest in these organizations.

(a) Related-party transactions

Transactions with these related parties are in the normal course of operations. Amounts due to or from and the recorded amounts of the transactions resulting from these transactions are included in the financial statements and the table below. They are recorded at the standard rates charged by those organizations and are settled on normal trade terms.

Revenues	2005	2004
Sask. Workers' Compensation Board	\$ 302,025	\$ 265,719
Saskatchewan Government Insurance	80,245	90,187

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

9. **Related Parties** (continued)

(a) Related-party transactions (continued)

Expenses	2005	2004
Saskatchewan Health Employees Pension Plan *	\$ 8,956,398	\$ 6,605,265
Sask. Workers' Compensation Board	2,368,912	2,622,476
S.A.H.O. - Disability Income Plan *	1,934,326	1,521,346
S.A.H.O. - Enhanced Dental Plan *	1,798,892	1,484,475
Sask. Power	1,395,463	1,294,576
Sask. Energy	1,293,343	1,050,221
S.A.H.O. - Employee Benefit Programs *	112,350	110,000
S.A.H.O. - Core Dental Plan *	838,866	847,772
Sask. Property Management Corporation	730,261	654,596
Sask. Tel.	483,388	469,504
Public Employees Pension Plan *	268,695	243,976
S.A.H.O.	278,530	195,719
Public Service Superannuation Board *	103,166	101,000
Regina Qu'Appelle Health Region	49,321	117,111

* Indicates that employee portion is included in the above expense.

In addition, the RHA pays provincial sales tax to the Saskatchewan Department of Finance on all its taxable purchases. Taxes paid are recorded as part of the cost of those purchases.

(b) Health-care organizations

i) Community-based organizations and third parties

The RHA has also entered into agreements with community-based organizations (CBO's) and third parties to provide health services.

These organizations receive operating funding from the RHA on a monthly basis in accordance with budget amounts approved annually. During the year, the RHA provided the following amounts to CBO's and third parties:

	2005	2004
Canadian Mental Health Association (Saskatchewan Division) Inc.	88,754	91,545
Parkland Alcohol & Drug Abuse Society Inc.	132,099	123,498
Society for Involvement of Good Neighbours Inc.	<u>229,515</u>	<u>224,039</u>
	<u>\$ 450,368</u>	<u>\$ 439,082</u>

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

9. **Related Parties (continued)**

(b) **Health-care organizations (continued)**

ii) **Affiliates with joint service management agreements**

The Act makes the RHA responsible for the delivery of health services in its region including the health services provided by privately-owned affiliates. The Act requires affiliates to conduct their affairs and activities in a manner that is consistent with, and that reflects, the health goals and objectives established by the RHA. Further, the RHA provides most of the affiliate's funding. Accordingly, the RHA has the ability to affect the strategic operating, investing and financing activities of the affiliates.

The RHA consolidated financial statements include the accounts of St. Anthony's Hospital, St. Peter's Hospital and St. Paul Lutheran Home of Melville based on the Joint Service Management Agreement held with each of the three organizations. The following information, which combines the operating fund and capital fund, is supplementary to those statements.

	St. Anthony's Hospital	St. Peter's Hospital	St. Paul Lutheran Home	Total 2005	Total 2004
Statement of Financial Position					
Total assets	\$ 1,667,671	\$ 1,140,182	\$ 5,365,569	\$ 8,173,422	\$ 8,345,885
Total liabilities	399,542	535,560	2,852,995	3,788,097	3,767,217
Total fund balances	1,268,129	604,622	2,512,574	4,385,325	4,578,668
	\$ 1,667,671	\$ 1,140,182	\$ 5,365,569	\$ 8,173,422	\$ 8,345,885
Results of Operations					
RHA grant	2,576,027	5,365,586	5,737,355	13,678,968	14,176,365
Other revenue	323,361	314,133	8,328,929	8,966,423	2,516,773
Total revenue	2,899,388	5,679,719	14,066,284	22,645,391	16,693,138
Salaries and benefits	2,016,273	4,351,649	6,934,302	13,302,224	11,824,636
Other expenses	715,438	1,418,434	1,665,283	3,799,155	3,227,882
Total expenses *	2,731,711	5,770,083	8,599,585	17,101,379	15,052,518
Excess (deficiency) of revenue over expenses	\$ 167,677	\$ (90,364)	\$ 5,466,699	\$ 5,544,012	\$ 1,640,620
* Other expenses includes amortization of \$467,745 (2004 - \$276,646)					
Cash Flows					
Cash from operations	356,545	14,417	84,397	455,359	2,484,468
Cash used in financing activities			(49,910)	(49,910)	(55,968)
Cash used in investing activities *	(253,881)	(62,449)	(108,328)	(424,658)	(2,048,544)
Increase (decrease) in cash	\$ 102,664	\$ (48,032)	\$ (73,841)	\$ 19,209	\$ 379,956

* Cash used in investing activities includes capital purchases of \$419,620 (2004 - \$2,048,546)

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

9. **Related Parties (continued)**

(b) **Health-care organizations (continued)**

iii) **Fund-raising foundations**

Fund-raising efforts are undertaken through the non-profit business corporations known as The Health Foundation of East Central Saskatchewan Inc., St. Peter's Hospital Foundation (Melville) Inc. and St. Anthony's Hospital Foundation Inc. (the Foundations). The RHA or the respective affiliates have an economic interest in the Foundations. The Foundations have the following year-ends:

The Health Foundation of East Central Saskatchewan Inc. - December 31
St. Peter's Hospital Foundation (Melville) Inc. - December 31
St. Anthony's Hospital Foundation Inc. - March 31

	St. Anthony's Foundation Inc.	St. Peter's Hospital Foundation (Melville) Inc.	Health Foundation of ECS Inc.	Total 2005	Total 2004
Statement of Financial Position					
Total assets	\$ 1,111,357	\$ 468,729	\$ 940,030	\$ 2,520,116	\$ 4,365,942
Total liabilities	80,283	3,999	80,852	165,134	385,788
Total fund balances	<u>1,031,074</u>	<u>464,730</u>	<u>859,178</u>	<u>2,354,982</u>	<u>3,980,154</u>
	\$ 1,111,357	\$ 468,729	\$ 940,030	\$ 2,520,116	\$ 4,365,942
Results of Operation					
Total revenues	53,894	81,317	1,774,034	1,909,245	2,028,721
Total contributions to the RHA	(94,126)	(43,127)	(3,133,368)	(3,270,621)	(861,126)
Total operating expenses	<u>(1,281)</u>	<u>(3,496)</u>	<u>(257,608)</u>	<u>(262,385)</u>	<u>(335,038)</u>
Excess (deficiency) of revenue over expenses	<u>\$ (41,513)</u>	<u>\$ 34,694</u>	<u>\$ (1,616,942)</u>	<u>\$ (1,623,761)</u>	<u>\$ 832,557</u>
Cash Flows					
Cash from operations	(143,243)	43,090	(1,721,638)	(1,821,791)	882,649
Cash from (used in) financing and investing activities	<u>190,962</u>	<u>(4,331)</u>	<u>—</u>	<u>186,631</u>	<u>(42,939)</u>
Increase (decrease) in cash	<u>\$ 47,719</u>	<u>\$ 38,759</u>	<u>\$ (1,721,638)</u>	<u>\$ (1,635,160)</u>	<u>\$ 839,710</u>

10. **Comparative Figures**

Certain 2003-2004 balances have been reclassified to conform with the current year's presentation.

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

11. Pension

Employees of the RHA participate in one of the following pension plans. Some employees participate in the Saskatchewan Healthcare Employees' Pension Plan (SHEPP), which is jointly governed by a board of eight trustees. Four of the trustees are appointed by the Saskatchewan Association of Health Organizations (SAHO) (a related party) and four of the trustees are appointed by Saskatchewan's health care unions (CUPE, SUN, SEIU, SGEU, RWDSU and HSAS). SHEPP is a multi-employer defined benefit plan, which came into effect December 31, 2002. (Prior to December 31, 2002, this plan was formerly the SAHO Retirement Plan and governed by the SAHO Board of Directors.) Other employees participate in either the Public Service Superannuation Plan (a related party), which is also a defined benefit plan, or the Public Employees' Pension Plan (a related party), which is a defined contribution plan. Both of these plans are the responsibility of the province of Saskatchewan. The RHA's financial obligation to the plans is limited to making required payments to match amounts contributed by employees for current services. Pension expense for the year amounted to \$4,955,065 (2004 - \$4,070,540) and is included in benefits in schedule 1.

Effective January 1, 2004, contribution rates increased as follows for the SAHO retirement plan:

6.552% of pensionable earnings up to the yearly maximum pensionable earnings (CPP)
plus 8.232% of pensionable earnings above the yearly maximum pensionable earnings (CPP).

Effective September 1, 2003, contribution rates increased as follows for the Public Service Superannuation plan:

17.99% to 18.00% of pensionable earnings.

12. Budget

The RHA Board approved the 2004-2005 budget plan on June 23, 2004.

13. Financial Instruments

(a) Significant terms and conditions

There are no significant terms and conditions related to financial instruments classified as current assets or current liabilities that may affect the amount, timing and certainty of future cash flows. Significant terms and conditions for the other financial instruments are disclosed separately in these financial statements.

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

13. Financial Instruments (continued)

(b) Credit risk

The RHA is exposed to credit risk from the potential non-payment of accounts receivable. The majority of the RHA's receivables are from Saskatchewan Health - General Revenue Fund, Saskatchewan Workers' Compensation Board, health insurance companies or other provinces. Therefore, the credit risk is minimal.

(c) Fair value

The following methods and assumptions were used to estimate the fair value of each class of financial instrument:

- The carrying amounts of these financial instruments approximate fair value due to their immediate or short-term nature

- cash and short-term investments
 - accounts receivable
 - accounts payable
 - accrued salaries and vacation payable

- For investments, the fair value is considered to approximate quoted market values.

- The fair value of mortgages payable before the repayment required within one year approximates the book value of the mortgages.

(d) Operating line-of-credit

The RHA has an approved operating line-of-credit limit of \$14,000,000 (2004 - \$14,000,000) with interest charged at a rate of prime less 0.25% which is renegotiated annually. The line-of-credit is secured by an assignment of grants and revenues of the RHA. Total interest paid on the line-of-credit in 2005 was \$336,619 (2004 - \$449,723). The line-of-credit was approved by the Minister on October 7, 1998.

The affiliates also have operating lines-of-credit, with limits totalling \$650,000 (2004 - \$650,000). These lines-of-credit are secured by an assignment of grants and revenues from the RHA. Total interest paid on these lines-of-credit in 2005 was \$1,078 (2004 - \$5,199).

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

14. **Interfund Transfers**

Each year the RHA transfers amounts between its funds for various purposes. These include funding capital asset purchases, and reassigning fund balances to support certain activities.

	2005			2004		
	Operating Fund	Capital Fund	Community Trust and Endowment Funds	Operating Fund	Capital Fund	Community Trust and Endowment Funds
Capital asset purchases by operating fund	(206,281)	696,394	(490,113)	(34,741)	62,916	(28,175)
Replacement reserve allocations	(137,056)	137,056		(121,656)	121,656	
Mortgage principal and interest paid by operating fund	(229,651)	229,651		(239,476)	239,476	
Operating expenditures financed by replacement reserve	5,769	(5,769)		5,584	(5,584)	
Operating expenditures financed by community trust funds	17,463		(17,463)	20,634		(20,634)
Operating expenditures financed by capital fund	7,333	(7,333)		61,809	(61,809)	
	<u>\$ (542,423)</u>	<u>\$ 1,049,999</u>	<u>\$ (507,576)</u>	<u>\$ (307,846)</u>	<u>\$ 356,655</u>	<u>\$ (48,809)</u>

Sunrise Regional Health Authority
Notes to Consolidated Financial Statements
For the year ended March 31, 2005

15. Volunteer Services

The operations of the RHA utilize services of many volunteers. Because of the difficulty in determining the fair market value of these donated services, the value of these donated services is not recognized in the financial statements.

16. Community-Generated Funds

Under the terms of the pre-amalgamation agreement, the RHA has agreed to hold community-generated assets in trust. The Board established a separate fund for the assets of each trust. Health corporations formerly held these assets before amalgamating with the Board. The assets are interest-bearing with the interest credited to the trust balance. The Board presently administers \$1,262,428 (2004 - \$1,767,644) under these agreements.

Following is the status of the trust funds at March 31, 2005:

Each trust fund has a "Trust Advisory Committee" which is appointed by the various towns, villages, hamlets and rural municipalities served by the pre-amalgamation agency. The trust funds are for the benefit of the ratepayers of the various municipalities and shall be used for health-related purposes. The committees have the power to establish rules and procedures and the majority decision of the committees shall be binding upon the RHA with respect to any use of the trust fund.

17. Contingent Liabilities

Joint job evaluation reconsiderations

The joint job evaluation pay equity initiative for the service provider union CUPE allowed for an appeal process. As a result, employees and employers have filed reconsideration appeals that are currently under review. A financial obligation to pay reconsideration costs occurs once the Steering Committee reviews the recommendations from the Reconsideration Committee and reaches a consensus decision. At the time of the issuance of these financial statements, the Steering Committee had not yet reached any final decisions regarding the reconsiderations.

As the final results of the reconsideration process are currently unknown, the cost of the reconsiderations cannot be reasonably determined.

Sunrise Regional Health Authority

Schedule of Expenses by Object
For the year ended March 31, 2005

Schedule 1

	Budget 2005	Actual 2005	Actual 2004
Operating:			
Benefits	15,141,450	15,697,380	13,909,889
Board costs	264,922	217,436	98,739
Diagnostic imaging supplies	300,973	302,215	282,467
Drugs	2,156,465	2,060,750	1,905,210
Food	2,320,015	2,349,407	2,245,629
Grants to ambulance services	2,175,800	2,159,704	2,103,118
Grants to third parties	286,128	450,368	439,082
Housekeeping and laundry supplies	1,169,625	1,210,389	1,198,686
Information technology contracts	307,098	230,599	146,430
Insurance	407,541	383,622	302,091
Interest	521,705	345,717	459,368
Laboratory supplies	892,204	938,370	873,335
Medical and surgical supplies	2,338,290	2,418,451	2,359,698
Medical remuneration and benefits	4,677,956	4,510,960	3,253,872
Office supplies and other office costs	1,146,009	1,036,830	1,068,037
Other	2,357,757	1,693,202	1,673,665
Other referred-out services	1,102,099	787,116	606,081
Professional fees	700,688	634,192	698,632
Prosthetics	244,498	181,235	216,948
Purchased services	1,185,969	824,083	934,922
Rent/lease costs	454,729	551,071	995,192
Repairs and maintenance	463,118	566,686	459,647
Salaries	82,285,796	83,603,206	80,593,406
Service contracts	1,049,061	1,088,596	968,642
Travel	1,335,034	1,115,158	1,175,899
Utilities	3,895,694	3,856,685	3,770,749
	<u>\$ 129,180,624</u>	<u>\$ 129,213,428</u>	<u>\$ 122,739,434</u>
Restricted:			
Amortization		4,133,539	3,927,838
Loss (gain) on disposal of capital assets		(11,471)	56,563
Other		<u>815,945</u>	<u>899,598</u>
		<u>\$ 4,938,013</u>	<u>\$ 4,883,999</u>

See accompanying notes to the financial statements.

Sunrise Regional Health Authority

Schedule of Cash and Investments

For the year ended March 31, 2005

Schedule 2

	Maturity Date	Effective Rate	Restricted Amount	Unrestricted Amount	Total
Cash and Short-Term Investments:					
Cash, chequing and savings accounts		0 to 2%	<u>4,849,360</u>	<u>161,722</u>	<u>5,011,082</u>
Term deposits					
Theodore Credit Union Ltd.	12/20/2005	2.50%	<u>103,900</u>	<u>0</u>	<u>103,900</u>
Guaranteed investment certificates					
Sunlife Trust	06/14/2005	6.35%		51,000	51,000
Canadian Western Bank	03/05/2006	2.00%	<u>0</u>	<u>20,000</u>	<u>20,000</u>
			<u>0</u>	<u>71,000</u>	<u>71,000</u>
Bonds and debentures					
Province of Saskatchewan Savings Bonds Series 9	07/15/2005	5.75%	91,000	71,100	162,100
Province of British Columbia coupon bond	03/05/2006	2.05%	<u>15,400</u>	<u>0</u>	<u>15,400</u>
			<u>106,400</u>	<u>71,100</u>	<u>177,500</u>
Total Cash and Short-Term Investments			<u>5,059,660</u>	<u>303,822</u>	<u>5,363,482</u>

Long-Term Investments:

The carrying amounts of the long-term investments approximate fair value.

	Maturity Date	Effective Rate	Restricted Amount	Unrestricted Amount	Total
Bonds and debentures					
Province of Saskatchewan Savings Bonds Series 12	07/15/2008	3.00%	52,200		52,200
Province of British Columbia coupon bond	06/09/2008	4.01%	53,999		53,999
Province of Prince Edward Island coupon bond	09/18/2009	4.31%		11,890	11,890
Term deposits					
North Valley Credit Union Ltd.	06/18/2008	2.00%	42,500		42,500
Guaranteed investment certificates					
Canadian Western Bank	06/18/2008	3.65%		54,761	54,761
National Bank of Canada	06/19/2006	2.00%		51,000	51,000
Bank of Nova Scotia	12/03/2006	4.80%		55,000	55,000
Laurentian Bank	06/17/2006	5.05%		51,000	51,000
Co-op. equity					
Equity in co-operatives		0.00%		5,801	5,801
Notes receivable - physicians					
Advanced July 2003	06/17/2006	5.05%			0
Advanced January 2004	03/31/2007	0.00%		72,094	72,094
Total Long-Term Investments			<u>148,699</u>	<u>301,546</u>	<u>450,245</u>
Total Cash and Investments			<u>\$ 5,208,359</u>	<u>\$ 605,368</u>	<u>\$ 5,813,727</u>

See accompanying notes to the financial statements.

Sunrise Regional Health Authority
Schedule of Externally-Restricted Funds
For the year ended March 31, 2005

Schedule 3

	Balance, Beginning of Year	Investment Income	Capital Expenditures	Operating Expenses	Balance, End of Year	
Pre-Amalgamation Trust Accounts:						
Foam Lake Health Centre	21,367	488			21,855	
Langenburg Health Centre	407,294	9,302			416,596	
Theodore Health Centre	103,003	3,457	(865)		105,595	
Yorkton & District Nursing Home	443,729	4,520	(448,249)			
Lakside Manor Care Home	17,270	394			17,664	
Canora Hospital	3,606	81			3,687	
Proceville Hospital	112,370	2,532			114,902	
Invermay Health Centre	19,471	434		(797)	19,108	
Gateway Lodge - Canora	105,765	2,219	(23,026)		84,958	
Gateway Lodge - Invermay	22,692	533		(966)	22,259	
Proceville Lions Housing	147,316	3,319			150,635	
Centennial Special Care Home	134,420	4,434			138,854	
Esterhazy Home Care	73,984	3,838			77,822	
Nesdorf Health Centre	59,523	1,110		(60,633)		
Melville Ambulance	95,836	2,155		(9,498)	88,493	
	1,767,646	38,816	(472,140)	(71,894)	1,262,428	
Endowment Fund						
Dr. Borys Tolczynski Memorial Fund	392,314	8,965	(17,972)	(8,965)	374,341	
	\$ 2,160,960	\$ 47,781	\$ (490,112)	\$ (80,859)	\$ 1,636,769	
	Balance, Beginning of Year	Investment Income	Donations	Expenses	Withdrawals	Balance, End of Year
Capital Fund						
Donations for Capital Assets						
St. Anthony's Hospital	28,032			(18,891)		9,141
St. Paul's Lutheran Home			20,000			20,000
Buna Pioneer Lodge	3,655	106	1,180			4,941
Esterhazy C.S.C.H.	4,297	3,192	157,885	(11,256)	(658)	153,460
Melville Home Care	2,712	67	1,192		(712)	3,259
Esterhazy Home Care	1,121	20	305			1,455
Palliative Care North	853	18	210			1,081
Canora Hospital	18,560	366	2,670		(2,624)	18,972
Kamsack Hospital	24,983	851	33,234	(3,000)	(1,660)	52,408
Kamsack Nursing Home	7,739	182	2,776			10,697
Proceville Hospital	56,514	1,414	4,748		(8)	62,668
Invermay Health Centre	691	21	355			1,067
Norquay Health Centre	8,720	202	3,827	(3,299)		9,450
Gateway Lodge - Canora	100,748	2,263	6,683	(6,298)		103,396
Proceville Lions Housing	2,405	74	103			2,582
Proceville Building Fund	92,632	2,044	10,961			105,637
Rama First Responders		6	1,000			1,006
South District - other	(557)	6			819	268
Yorkton R.H.C.		88	8,114	2,829	(3,894)	7,137
Community services	736	38	160		(400)	534
	\$ 353,841	\$ 10,967	\$ 255,403	\$ (41,912)	\$ (9,132)	\$ 568,167

See accompanying notes to the financial statements.

Sunrise Regional Health Authority
Schedule of Internally-Restricted Reserves
For the year ended March 31, 2005

Schedule 4

	Balance, Beginning of Year	Current Year Allocation	Investment Income	Capital Expenditures	Operating Expenses	Balance, End of Year
Capital						
Replacement reserve funds:						
Yorkton & District Nursing Home	187,151	21,504	4,678	(93,791)		119,542
Foxen Lake Jubilee Home	49,871	11,592	1,248	(1,778)		60,933
Lansburg Centennial						
Special Care Home	28,231	10,284	541	(20,268)	(1,377)	13,411
Lakeside Manor Care Home	111,142		2,153	(16,813)		86,482
Anderson Lodge	77,774		1,250	(54,188)		24,836
Ambulance replacement	35,273		806			36,079
St. Paul Lutheran Home	167,750	15,400	5,853	(38,373)	(1,132)	149,498
Emergency Centennial						
Special Care Home	68,021	13,008	1,870	(2,517)		80,382
East Coburn Family Resource Centre Inc.	243				(243)	
Ituna and District						
Pioneer Lodge	27,704	5,604	760	(2,130)		31,938
Gateway Lodge - Canora	13,225	14,256	401	(5,630)		22,252
Gateway Lodge - Invermay	19,938	7,008	286	(6,290)	(861)	10,081
Gateway Lodge - Norquay	16,827	7,008	416			22,251
Kennock Nursing Home	28,155	14,592	804			43,551
Ponserville Lions Housing	108,532	16,800	2,471	(24,214)	(2,156)	101,433
	<u>913,837</u>	<u>137,056</u>	<u>23,537</u>	<u>(265,992)</u>	<u>(5,769)</u>	<u>802,669</u>
Other internally-restricted funds:						
Funds for future capital expenditures	5,362,055		41,567	(1,446,737)		5,156,885
Operating surplus restricted by RHC board for capital purposes	<u>248,234</u>			<u>(248,234)</u>		
	<u>\$ 5,720,126</u>	<u>\$ 137,056</u>	<u>\$ 65,104</u>	<u>\$ (1,960,963)</u>	<u>\$ (5,769)</u>	<u>\$ 5,959,554</u>
Operating						
Other internally-restricted funds:						
East Coburn Family Resource Centre Inc.	26,686	2,047	202			26,935
St. Paul Lutheran Home General Fund	<u>169,677</u>				<u>(169,677)</u>	
	<u>\$ 196,363</u>	<u>\$ 2,047</u>	<u>\$ 202</u>	<u>\$ 0</u>	<u>\$ (169,677)</u>	<u>\$ 26,935</u>

The Board is required to maintain certain reserves as a condition of receiving subsidy assistance from Saskatchewan Housing Corporation.

Sunrise Regional Health Authority
Schedule of Board Remuneration, Benefits and Allowances
For the year ended March 31, 2005

Schedule 5

	2005			2004	
	Retainer and Per Diems	Benefits	Other Expenses	Retainer and Per Diems	Benefits and Other Expenses
Chairperson					
Ben Weber	16,700		2,783	14,600	3,292
Board Members					
Irene Adams	3,200		1,260	3,300	1,236
Joe Garchinski	1,525	47	498	3,484	1,622
Janet Hill	2,800	87	194	2,775	263
Audrey Horvoff	3,925	129	1,358	2,560	741
Karen Keshane	3,125	129	2,342		
Raymond King	3,775		1,253	4,800	1,919
Greg Kobylka	1,698	110	612		
Beverly Kostichuk	3,100	117	657	2,333	565
John Nightingale	4,900		2,546	3,975	1,943
Jerome Orzynsky	3,700		795	3,000	651
Ivan Peterson	4,675	186	2,914	3,651	1,913
Albert Seib	4,050	142	1,595	3,858	1,628
Total	\$ 57,173	\$ 947	\$ 18,807	\$ 48,336	\$ 15,773
					\$ 64,109

(1) Benefits include employer CPP and all travel time.

See accompanying notes to the financial statements.

Sunrise Regional Health Authority

Schedule of Senior Management Salaries, Benefits, Allowances and Severance

For the year ended March 31, 2005

Schedule 5 (continued)

	2005				2004			
	Number of FTE's	Salaries	Benefits and Allowances	Severance	Number of FTE's	Salaries, Benefits and Allowances	Severance	Total
Chief Executive Officer	1.00	124,479	15,624	140,103	1.00	138,211		138,211
Senior Positions								
Executive Directors of								
Finance and Information								
Services	1.00	99,604	15,011	114,615	1.00	94,794		94,794
Human Resources	1.00	104,847	15,407	120,254	1.00	115,676		115,676
Support Services	1.00	99,991	15,121	115,112	1.00	112,431		112,431
Acute Services	1.00	111,836	16,186	128,022	1.00	116,859		116,859
Long-Term Care Services	0.64	64,655	7,973	72,628	1.00	106,488		106,488
Community Services	1.00	100,213	15,518	115,731	1.00	107,832		107,832
Corporate Planning	1.00	108,561	15,601	124,162	1.00	116,792		116,792
Chief of Staff	1.00	108,437		108,437	0.58	69,682		69,682
Total	8.64	\$ 922,632	\$ 116,441	\$ 1,039,064	8.58	\$ 978,765	\$ 0	\$ 978,765

(1) Salaries include regular base pay, overtime, lump-sum payments, honoraria and any other direct cash remuneration including sick leave and vacation.

(2) Benefits and allowances include the employer's share of statutory and non-statutory benefits and employee's taxable allowances.

See accompanying notes to the financial statements.

**SUNRISE REGIONAL HEALTH AUTHORITY
PAYEE DISCLOSURE LIST
For the Year Ended March 31, 2005**

Personal Services

Listed are individuals who received payments for salaries, wages, honorariums, etc. which total \$50,000 or more

ABDAI, LAURETTA	\$ 75,554
ABRAHAMSON, DAWNA	67,531
ADAMS, JAIME	62,858
AHUJA, PRAVEEN	62,207
ALBRECHT, EMANUEL	76,156
ANDREW, H ELAINE	64,255
ANDREYCHUK, FRANCES	69,547
ANDRUSIAK, ELAINE	67,486
ANUIK, JOAN	75,743
ARESHENKO, MARGE	65,707
ARNESON, BRIANNA	61,627
ARNOLD, SANDRA	91,170
BABYAK, CAROLYN	62,735
BACCHETTO, THERESA	52,563
BADOWICH, WILLIE	57,944
BALES, SHERI	51,730
BARAN, PETER	60,856
BARON, SANDRA	61,673
BARR, CINDY	59,167
BARTESKI, PAULETTE	58,225
BASSINGTHWAITE, JOYCE	70,020
BAUER, BERYL	70,530
BEAR, CHERYL	65,706
BEAR, SHEILA	65,757
BEAR, SUSAN D	58,996
BEATTY, DONNA	61,893
BELL, SHERRY	65,314
BELLEGARDE, CANDICE	53,768
BENKO, LINDA	67,011
BERG, PAUL	82,266
BERGER, BEVERLY	76,266
BERGERMAN, DESIREE	64,716
BERGMAN, SYLVIA	55,090
BERRECIOTH, KAREN	64,223
BILOKRELI, ROSANNA	63,889
BILYK, GWEN	66,431
BITTNER, CORRINE	58,509
BLENNER HASSETT, BONNIE	67,178
BLOMMAERT, HIDI	64,404
BODE, SANDRA	62,175
BODNAR, JOANNE	72,265
BODNAR, SHERYL	65,891
BOHN, ARLENE	67,060
BOHN, DEBORAH	67,985
BOMBERAK, TANIA	50,234
BORGFORD, BEVERLEY	59,270
BORGFORD, LAWRENCE	71,887
BORNYK, VINCENT	100,213
BOYCE, TWILA	61,138
BOYCHUK, JANICE	63,475
BOYLE, EILEEN	66,158
BREITKREUZ, JAYNELLE	66,853
BREITKREUZ, LAURIE	56,256
BREITKREUZ, MARTHA	55,568
BREZINSKI, ROSELINE	70,372
BROOKS, BRENDA	58,267
BROWN, LYNDA	64,480
BRYMER, DORIS	61,331
BUCHINSKI, SHARON	66,346
BUCSIS, KIM	60,858
BUECKERT, BRIAN	56,717
BUECKERT, YVONNE	66,959

Supplier Payments

Listed are payees who received \$50,000 or more for the provision of goods and services, including office supplies, communications, contracts and equipment.

A&S TRANSPORT	126,957
A.C.M.I. Canada Inc.	81,780
Alcon Canada Inc.	389,918
Arjo Canada Inc.	76,170
Bayer Inc.	207,772
BECKMAN COULTER CANADA INC	228,306
BISHOP, DR. MICHAEL	108,437
Boston Scientific Ltd.	73,770
BRIDGE BRAND	736,901
BUNZIL CANADA INC.	159,713
BURGER, DR. J.	141,139
C.U.P.E. - LOCAL #4980 REGION	959,305
Canadian Corps of Commissionair	128,374
CANORA AMBULANCE CARE (1998) LTD.	426,253
Carsen Group Inc.	87,876
CEG Energy Options Inc.	787,407
CITY OF YORKTON	355,183
CLARICA/SUNLIFE CENTRAL	193,911
CLARK ROOFING (1964) LTD.	305,205
CMHA - Sask. Division	88,754
COETZEE, DR. J.	140,061
Cook Canada Inc.	61,919
COTTENIE AND GARDNER INC	82,575
CPDN 3130827 Canada Inc.	585,049
CRESTVUE AMBULANCE SERVICE LTD.	640,250
CULEASE FINANCIAL SERVICES	53,630
CUPE # 4980 (NORTH & SOUTH)	68,151
DAIRYLAND FLUID DIVISION LTD.	129,379
DANKA OFFICE IMAGING	57,995
DAS: DR MADHAVAN S.	270,880
DOWIE'S QUICK PRINT LTD	72,508
DUCK MOUNTAIN AMBULANCE CARE LTD.	520,309
FOURIE, DR. P.	130,393
Fresenius Medical Care Canada	99,600
FUTUREMED HEALTH CARE PRODUCTS INC.	51,405
GAMBRO	95,652
GE CAPITAL	80,466
GRAND & TOY	121,736
Great West Life Assurance Compa	535,790
Hahn, Dr. J. A.	466,106
Haque, Dr. M. N.	63,400
HORIZON COMPUTER SOLUTIONS	668,003
HOSPIRA HEALTHCARE CORP/ABBOTT LAB	581,437
INDEPENDENT AGENCIES	199,427
J.B. MEDICAL	175,161
Janssen-Ortho Inc.	256,677
JOHNSON & JOHNSON	279,707
KIDS ZONE DAYCARE	124,696
KILBACK'S AMBULANCE SERVICE	208,715
KODAK CANADA INC.	98,797
KOTIN, DR. SVETLANA	276,637
KOUDSI, DR. NASIR	54,065
L & M PHARMACY	98,300
LEE, DR. F. R.	78,750
LIFELINE SYSTEMS CANADA	71,058
MARK'S AGENCY (1981) LTD.	71,327
Mathew & Company	113,692
MCKESSON CANADA	316,887
MED-COM COMPREHENSIVE DISPATCH	88,409
MEDEX CANADA INC.	53,869
Medi - i - Part Inc	120,259
Medtec Marketing	216,920
Payee List	

BUENO, JANET	60,391	Merck Frosst Canada Inc	159,348
BUHLER, DEBBIE	60,613	MINISTER OF FINANCE/REVENUE DIVISION	129,658
BURBACK, DWAYNE	60,760	Momentum Health Information Sys	93,407
CALEF, SUSAN	55,162	NRS SYSTEMS	94,582
CALLAGHAN, SHARON	56,419	ODUNTAN: DR. O.	90,008
CAMERON, CAROLYN	61,804	Ortho Clinical Diagnostics	525,240
CANFIELD, LINDA	60,034	PARKLAND ALCOHOL & DRUG ABUSE S	132,099
CARNDUFF, KAREN	50,868	PCL-MAXAM, A JOINT VENTURE	11,739,266
CHAMPAGNE, GLORIA	70,146	PENGUIN REFRIGERATION LTD./YORKTON	58,030
CHEREWYK, ERNEST	61,518	PERIDOT GROUP INC.	62,572
CHEREWYK, STEPHANIA	51,056	PHILIPS MEDICAL SYSTEMS CANADA.	1,310,903
CHERLAND, HENRIK	61,217	POON, DR. KEN	119,064
CHERLAND, JOLEEN	62,745	PRAIRIE DISTRIBUTORS (CENTRAL) INC.	61,786
CHICILLO, VIVIAN	66,098	PREECEVILLE AMBULANCE CARE('98	484,763
CHILLOG, SHARON	51,999	PRINSLOO: DR. W.	148,063
CHO, HYUN JU	54,196	PUBLIC EMPLOYEES PENSION PLAN	268,695
CHOPTUIK, KAREN	54,359	PUBLIC SERVICE SUPERANNUATION	103,166
CHUPA, BRIAN	64,086	Quality Life Services	205,277
CHUPA, JODY	66,209	RADIOLOGY ASSOCIATES	64,248
CHUPIK, TERESA	59,232	RCDP/CPDN	72,236
CHURKO, JOANNE	123,326	RECEIVER GENERAL FOR CANADA	27,054,426
CHURKO, VALERIE	66,001	REMUS: GAIL	58,009
CLARKE, LINDA	61,195	RESIDENT TRUST ACCT	446,135
CLEMENTS, SHEILA	64,326	ROCHE DIAGNOSTICS/LAVAL,PQ	60,487
COBB, JANICE	53,829	S.A.H.O.	263,588
COLEMAN, DEBBIE	56,473	S.A.H.O. - CORE DENTAL	838,866
COMBRES, GILBERT	63,036	S.A.H.O. - DIP	1,934,326
COTE, ELAINE	57,990	S.A.H.O. - ENHANCED DENTAL	69,874
COTTENIE, DEBORAH	62,413	S.I.G.N.	277,756
COTTENIE, KATHERINE	52,967	S.I.G.N. - APARTMENT LIVING	93,387
CRAIG, BLANCHE	69,731	S.I.G.N. - VOCATIONAL	98,549
CRELLIN, ROY	69,850	S.P.M.C.	730,261
CYMBALISTY, PHYLLIS	59,386	SAHO - EMPL STRAT (NORTH)	112,350
CYR-PHILIPCHUK, SUSANNE	56,143	SAHO-IN-SCOPE-ENHANCED DENTAL PLAN	1,594,314
DAELICK, ALLAN	99,992	SAHO-OUT-OF-SCOPE ENHANCED DENTAL	134,704
DAHLIN, LIVIA	69,870	SALIB: DR. M.	95,598
DALES, CHERYL	67,110	SANITEC CANADA	63,970
DANYLUK, MILDRED	71,203	SASK UNION OF NURSES	395,355
DAREICHUK, RUTH	82,972	SASK WCB	52,413
DAUM, GAYLE	78,802	SASK WORKERS COMPENSATION BOARD	2,034,267
DAVIDSON, BETTY	58,595	Sask Workers' Compensation Board	61,016
DEBRUIN, MAVIS	63,354	SASKATCHEWAN WORKERS' COMP. BOARD	221,217
DECORBY, ALLISON	55,833	SASKENERGY	1,293,343
DEDMAN, BRENDA	60,835	SASKPOWER	1,394,603
DEN BROK, LORI	67,336	SASKTEL	483,388
DENNIS, LORRAINE	59,691	Schaan Healthcare Products	898,015
DENYSEK, CHRISTINA	104,846	SHAMROCK AMBULANCE/WYNYARD	231,614
DERKACH, HILDA	67,359	SHEPP/PENSION ONLY	8,956,398
DETERS, CAROL	63,894	SHERRING GOLD LTD.	82,921
DICKSON, PAMELLA	51,298	SODEXHO SERVICES CANADA	1,210,951
DIEHL, JANET	59,031	SOFTCHOICE CORPORATION	78,274
DIERKER, JEAN	54,943	SOUMBASIS:DR. E.	146,619
DIERKER, TAMSEN	61,192	SOURCE MEDICAL CORPORATION	603,101
DILTS, JUDITH	62,945	SPIES: DR. C	60,000
DOBKO, KIM	61,520	SRNA	153,242
DOBMEIER, TAMARA	53,812	ST. ANTHONY'S HOSPITAL	432,502
DREHER, DIANE	65,110	STANTEC ARCHITECTURE LTD.	417,566
DRESSLER, JOAN	64,137	STRYKER CANADA	312,191
DUBELT, AGNES	55,208	SUNSPUN	61,897
DUBNYK, NANCY	83,888	SUPREME OFFICE PRODUCTS	98,975
DUDA, SUSAN	67,057	SYSCO/SERCA	732,931
DUNCAN, SHERRYLEE	63,671	THE STEVENS COMPANY LTD	64,494
DURDIN, HELEN	91,695	TIM SLATTERLY/HEALTH SCIENCES ASSOCIATION	80,314
DUTCHAK, MONICA	62,764	TOWN OF SALT COATS	70,852
DYKUN, KIMBERLY	65,078	TRICIFIC ENTERPRISES INC.	101,401
ECKLIN, VALINDA	50,358	TSATS: DR. L.D.R.	115,533
EDLIN, ROBERT	63,470	TYCO HEALTHCARE GROUP CANADA INC.	401,043
ELASCHUK, SUZANNE	61,256	UNISOURCE CANADA INC.	71,144
ELLIOTT, TERESA	50,249	VAN HEERDEN, DR.	94,571
ELLIS, JACKIE	50,947	VITALAIRE HEALTHCARE	166,332
ELMY, VERENE	66,858	WEBER CONSTRUCTION LTD.	368,792
ERICKSON, GLENDA	59,445		
FAGRIE, OLIVIA	57,211		
FAHLMAN, JEANETTE	66,387		

Other Expenditures

Payee List

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FALKINER, CHARLENE	89,768
FAYE, SHELLY	56,195
FEDORCHUK, KATHY	50,404
FEDUN, RICHARD	55,632
FEHR, KARINA	52,414
FENSKE, MARGARET	64,976
FENWICK, SHERILYN	54,875
FIEGE, PATRICIA	50,492
FIELDING, ROGER	57,376
FIESELER, JUDY	61,470
FITZPATRICK, PHYLLIS	94,371
FLAMAN, JANICE	63,905
FLUNDER, ADELIA	52,454
FLUNDER, LORRAINE	60,626
FOGG, MARIANNE	60,604
FOX, SHERRELL	63,517
FRANKE, JULIETTE	72,567
FREDERICKSON, JUDY	62,070
FRICK, GRACE	60,239
FRITZKE, JANICE	61,392
GAWRYLIUK, DONNA	65,920
GEMBEY, DEBORAH	50,816
GRIFFITH, DOROTHY	60,938
GRIFFITH, WENDY	52,669
GRODZINSKI, LISA	65,474
GRUNERT, BONNIE	62,425
GRUNERUD, MARCIA	51,466
GRYWACHESKI, DEBORA L	62,943
GULKA, LESLIE	62,515
GUY, JOY	73,869
HAGGARTY, BLENDA	54,398
HALYK, EDITH	62,870
HALYK, JANE	55,124
HALYK, THERESA	60,973
HAMILTON, GAYLENE	56,462
HANCOCK, MARGARET	89,442
HANLINE, SYLVIA	61,638
HANNAH, JANICE	60,492
HANSEN, JOAN	74,606
HASSETT, TRACY	62,409
HASSLER, RAYE	64,410
HATTON, IRENE	59,246
HEGEDUS, MELVINA	55,612
HERMAN, AUDREY	59,404
HERMANSON, MARION	63,483
HERTLEIN, JUDY	51,820
HESHKA, LORIE	81,532
HILTON, FRED	50,643
HLUCHANIUK, COLLEEN	64,796
HODGES, TERRACE	83,068
HOFFMAN, JANET	63,862
HOLLMAN, JOANNE	54,767
HOLOVACH, BARBARA	60,592
HOLOWACHUK, KIMBERLEY	62,742
HOLZMANN, JACQUEL	51,095
HONEYWICH, BRIAN	54,432
HONEYWICH, GERALDINE	63,356
HORDICHUK, ERNEST	110,578
HORNUNG, DIANA	67,409
HOVRISKO, JEAN	77,889
HOWARD, ARLETTE	53,505
HOWE, BEVERLEY	71,603
HRYNIUK, CAROL	59,459
HUBIC, JOY	65,776
HUCKABAY, ANTHONY	66,724
HUGHES, DENNIS	52,969
HUTZUL, LYNNE	50,903
IVANOCHKO, NINA	59,838
JACOB, CARLA	50,244
JACOB, LEAANNE	66,443
JAMIESON, DIANE	76,624
JAMIESON, LINDA	50,480
JANSSEN, COLLEEN	53,533
JANZEN, PATRICIA	62,452

Listed are payees who received \$50,000 or more for expenditures not included in the above categories.

JESKE, GERTRUDE	61,742
JOHNSON, CATHERINE	62,591
JONSON, LOIS	62,956
KACZUR, SHERRIE	73,963
KARDYNAL, LORI	50,207
KEIL, FERN	59,202
KELLEN, JOY	55,223
KELLER, LORI	73,626
KENNEDY, DAWN	63,843
KEYOWSKI, EVELYN	71,657
KEYOWSKI, JANICE	54,057
KEZIMA, LINDA	71,924
KINDRATSKY, ILONA	76,040
KING, MARGARET	64,595
KIRK, BEVERLY	56,687
KIRSCHMAN, KELLY	52,769
KIRWAN, JOSEPH	124,479
KITCHEN, RONALD	50,480
KITZ, LINDA	53,612
KITZ, SHARILYN	66,753
KITZUL, LAURIE	56,434
KLAPATIUK, JANET	72,148
KLIMCZAK, CHRISTINE	55,101
KLUK, DAVID	68,169
KLUK, GEORGETTE	69,711
KLUK, SHELLEY	60,246
KOBAN, GERALDINE	65,295
KOLISNEK, KEN	50,156
KONAN, MELODY	63,722
KORMOS, BARBARA	71,654
KOSKIE, SUSAN	77,449
KRAYNICK, KAREN	68,001
KROCHAK, CARLA	58,231
KRYKLYWICZ, PATRICIA	56,002
KURLUK, DOROTHY	64,927
KUSPIRA, PAT	57,919
LAEVENS, BERNADINE	52,670
LANGE, BARBARA	59,773
LARSON, LORI	62,477
LAUBE, ANNETTE	63,435
LAURENT, SUANN	111,836
LAW, VERA	57,892
LAY, SHARON	53,676
LAZURKO, DONNA	76,549
LEECH, HEIDI	54,327
LEGER, CAROLINE	62,371
LEGGE, KAREN	66,223
LENDERBECK, ELEANOR	66,935
LEONARD, KAREN	56,473
LEONARD, SERGE	63,260
LEPPINGTON, BRENDA	63,546
LIEBRECHT, WILMA	68,593
LINK, DEBRA	62,193
LOMBARD, HERMANUS	270,049
LOVERIDGE, KAREN	50,427
LOVERIDGE, LINDA	72,803
LUTZ, KAREN	63,070
LYSAK, LORRAINE	76,948
LYSIUK, DEBRA	71,761
MACKENZIE, BRENDA	67,411
MACLEAN, BRENDA	63,714
MAIER, PAULINE	53,830
MAKSYMOW, DORIS C	62,366
MALAYNEY, CHARLENE	63,942
MANASTYRSKI, LOEN	52,193
MARCYNUK, GAIL	67,403
MARTIN, SHAWN	51,313
MATECHUK, MARION	77,147
MATISHO, MARGARET	75,896
MATSALLA, JAMES	75,881
MAURER, VIRGINIA	60,471
MCCORMICK, DONNA	72,250
MCDONALD, LYNN	50,463
MCGILL, GLENN	67,724

MCGILLIVRAY, BONNIE	55,060
MCGONIGAL, TERA	51,724
MCINTYRE, DONNA	62,159
MCKEE, BRENT	58,324
MCLAREN, MARIA	52,243
MCLEAN, CAROL	61,964
MCLELLAN, GLADYS	79,029
MCNEIL, KELLY	58,432
MEDLANG, DARLENE	64,815
MEHLING, CHARMAINE	60,815
MELNYK, EILEEN	76,586
MICHALCHUK, SANDEE	50,991
MILBRANDT, DONNA	82,322
MILLER, WADE	59,240
MILLHAM, JAMIE	62,893
MIRCHANDANI, MUKESH	279,492
MITCHELL, MURIEL	58,884
MITSCHKE, THOMAS	51,237
MOHR, SHIRLEY	59,384
MOLNAR, KARA	62,314
MORASH, LORI	53,879
MOTTER, SHARON	59,520
MROZOWICH, JERRY	51,949
MURPHY PARK, JACKIE	51,602
MURPHY, VIVIAN	62,138
MURRAY, ELIZABETH	50,094
MUSYJ, ELAINE	50,735
NAGY MALINOSKI, CORREEN	65,497
NAPADY, KIMBERLEY	70,247
NASBY, AARON	57,400
NAWAZ, NAVA	225,464
NECHVATAL, LORNA	52,972
NELSON, DARLENE	60,713
NELSON, JANE	85,058
NICHOLLS, CATHERINE	50,552
NIECKAR, GAIL	54,680
NORDSTROM, PATRICIA	57,661
NORMAN, DIANNE	62,977
NYSTROM, TANYA	72,774
O'BYRNE, MARDEL	59,473
OFF, EUNICE	74,223
OKRAINEC, LOIS	61,643
OLIJNYK, MICHELLE	70,009
OLSHIEWSKI, DONNA	63,667
OLSON, SHIRLEY	56,816
ONESCHUK, RHONDA	64,366
ONSLow, DARLENE	71,887
OSTAFICHUK, MAYNARD	56,737
OSTAPOVICH, ANGELA	51,426
OSTAPOVICH, EUGENE	53,589
OSTLIE, CAROLINE	63,494
OUCHAREK, JOAN	63,258
PACEY, BEVERLEY	66,079
PACHAL, SHIRLEY	67,060
PADAR, SANDRA	72,070
PALCHEWICH, ELIZABETH	54,940
PARKVOLD, CARRIE	63,511
PARKVOLD, JASON	65,956
PARROTT, EDNA	74,438
PARSONS, GAIL	55,080
PASLOSKI, BRENDA	57,929
PAWLIK, DARLENE	50,775
PAWLIW, LOIS	61,392
PEDERSEN, PATRICIA	57,088
PEESKER, SHIRLEY	52,277
PELECHATY, CARLA A	58,427
PEREPIOLKIN, PATRICIA	74,450
PERRAULTSTREETER, LISE	62,947
PETRIE, ELEANORE	59,481
PETRIW, SVETLANA	55,494
PFEIFER, LORNE	63,475
PICKARD, VIRGINIA	70,495
PIERCE, SHIRLEY	62,579
PILIPOW, JANICE	55,477

PINDER, LENORE	56,509
PINDUS, SHAWN	61,671
PODOVINNIKOFF, JANIE	69,468
POIRIER, MARIE	81,523
POLLOCK, ONEY	63,594
POLLOCK, SHAUNA	59,493
POPOWYCH, JANE	62,391
POTT, PAMELA	50,443
POWERS, KIMBERLY	53,210
POZNIAK, DEBORA	70,693
PROBE, JUDY	61,837
PROPP, LEANNE	63,385
PRYCHAK, SHERI	71,032
PURITCH, MEL	74,325
RANSOME, LISA	52,524
RANSON, JUDY	60,450
REDENBACH, MICHAEL	108,560
REDENBACH, TARA	62,177
REGIMBAL, RENEE	59,115
REIMAN, DEBRA	85,582
RENKAS, SHELLEY	58,069
RHINAS, MYRNA	72,756
RICHARDS, MARTHA	64,655
RIEGER, LINDA	69,038
ROBERTSON, GAYLEEN	54,504
ROBINSON, ROBIN	70,249
RODGER, PEGGY	81,052
ROLL, S JUDITH	62,633
ROMANCHUK, CRYSTAL	51,384
ROSE, JEAN	53,905
ROSS, ROANNA	59,015
ROZDEBA, CRES	53,564
RUDY, SHARON	52,850
RUSHKA, MARGARET	83,403
RUSSELL, ANNA	63,247
RUSSELL, PAMELA	63,747
SAALMANN, BEATE	56,357
SAGAN, MARLENE	57,197
SAND, CONNIE	53,306
SANFTLEBEN, LAURA	51,159
SAWKIW, KAREN	52,855
SCHAAB, LORETTA	55,392
SCHENDEL, JANICE	64,137
SCHERGEVITCH, THERESA	59,958
SCHICK, DELORES	59,422
SCHICK, JENNIFER	64,301
SCHINDLER, DURRIE	80,195
SCHMIDT, KENT	61,977
SCHRAMM, DAWN	61,275
SCHULTZ, RHONDA	65,865
SCRATTON, ARLENE	68,070
SEELEY, WENDY	66,582
SEIB, JOANNE	58,558
SHABATOSKI, CHERISE	72,890
SHAHAB, SAQIB	164,664
SHANNON, TAMMY	59,235
SHARP, LESLIE	50,445
SHARPE, GEORGINA	68,065
SHEWCHUK, PHYLLIS	55,884
SHINKIEWSKI, MARUSIA	59,189
SHIVAK KWEENS, DAWN	63,709
SHUMAY, BRENDA	74,510
SHWAGA, KOLI ANN	53,576
SICINSKI, SUSAN	57,758
SIES, BRYAN	53,762
SIMINOFF, MYRA	58,564
SIMPSON, JANET	62,469
SKORETZ, JOANNE	57,799
SLONSKI, LINDA	60,588
SOBKOW, ERNA	58,199
SORSDAHL, GEORGE ED	67,986
STAMATINOS, LESLEY	72,801
STANLEY, JACKI	50,962
STATKEWICH, JACOMINA	65,403

STECHYSHYN, DARLA	61,476
STECHYSHYN, ELSIE	54,501
STEELE, LOUISE	70,485
STEELE, SCOTT	63,525
STEPPAN, LAUREL	93,908
STEVELY, KAREN	53,898
STEWART, SUZANNE	56,050
STOKES, SANDRA	62,020
STOLL, MOIRA	54,363
STOPA, PATRICIA	67,039
STOYKO, WENDY	69,843
STRATECHUK, TWYLA	52,661
STRENDIN, LYNN	58,534
STRINGFELLOW, CAROLINE	58,474
STROMBERG, PATRICIA	62,167
STRONG, DOREEN	58,363
STRUKOFF, GAIL	62,905
STRUTYNSKI, MARTHA	73,975
STUMBORG ROSIN, VIRGINIA	62,816
STUSEK, LORELEI	99,604
SUEHSSCHLAF, KAREN	55,687
SUSCHINSKY, DOREEN	87,540
SUTCLIFFE, DEBRA	62,415
SUTTER, DAVID	71,949
SZABO, TRENT	72,440
TANGJERD, ARLENE	61,127
THEBAUD, ROSELLA	59,111
THORLEY, LINDA	66,437
THORSTEINSON, JUDY	54,849
THREINEN, DONNA	69,329
TOKARUK, SANDY	55,505
TOMSKI, GLADYS	92,873
TOMYN, JANICE	66,881
TORRIE, VERNA	51,139
TRATCH, KAREN	50,059
TRIPP, LOUISE	52,995
TROPIN, SHARON	59,109
TURBERFIELD, OLGA	52,404
UNCHULENKO, CAROL	67,067
VANDANE, SANDRA	64,750
VANNESTE, LINDA	56,130
VAUGHAN HASTIE, SANDRA	60,901
WAGNER, GREGORY	59,614
WALCHUK, CYNTHIA	57,262
WALKER, SHERRI	60,866
WALSH, BRENDA	79,449
WALSH, NOLA	61,643
WARBURTON, PATRICIA	69,524
WEBER, WANDA	62,024
WEGNER, DAWN	68,130
WEISS, LEAH	57,746
WERLE, HAZEL	57,304
WESTBERG, BEVERLEY	64,255
WESTERMAN, JULIA	63,209
WHITE, EVA	69,060
WILEY, LAURA	88,810
WIONZEK, ANDREA	53,939
WIWCHARUK, ROBERTA	66,999
WOICICHOWSKI, KAREN	76,252
WOODS, WILLIAM	50,082
WOTHERSPOON, DEBORA	63,045
WRISHKO, LYNN	66,436
WUNDER, LYNNE	62,289
WUSCHENNY, MARY	65,759
WYATT, GORDON	78,010
YACHYSHYN, DEBORAH	54,307
YACYSHYN, MARY ANN	63,498
YAREMKO, CHERYL	66,050
ZILCH, MARGARET	51,725
ZULYNIAC, CURTIS	69,539
ZULYNIAC, SHARON	56,313



